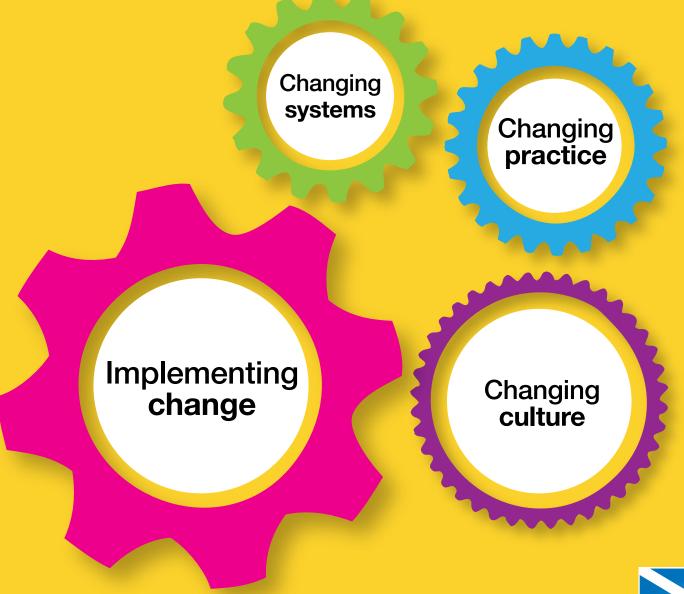


A Guide to Implementing *Getting it right for every child*: Messages from pathfinders and learning partners June 2010





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FOREWORD

There is no more important task than ensuring that we get it right for Scotland's children and young people. That is the simple objective of *Getting it right for every child*, and applies to all work across children's services, as well as adult services, which have an impact on children. Achieving that objective is a challenge especially at a time of pressure on resources and in the face of the varied needs and risks faced by Scotland's children and young people.

Getting it right for every child is the golden thread that knits together our policy objectives for children and young people. I was very pleased that this approach was endorsed by the Scottish Parliament in December 2009. I was also very encouraged by the publication by the University of Edinburgh of the evaluation of the pathfinding programme. The evaluation studied the development and early implementation of *Getting it right for every child*. One key finding is that leadership is vital at every stage, and every level. Senior leadership especially is fundamental to the success of *Getting it right for every child*. Lessons are still being learnt from Highland and other areas as the changes become embedded.

Getting it right for every child is at the heart of the Government's approach to children and young people. There are two reasons for this.

First, *Getting it right for every child* is about improving outcomes for children and making sure that all agencies respond appropriately to needs and risks. It provides mechanisms for identifying and planning how we help children and young people. It seeks to improve services and measure the impact they have on a child's well-being as expressed through the eight Well-being Indicators. It directly supports work to achieve many of the agreed National Outcomes, such as ensuring that our children have the best start in life, and our public services are high quality, continually improving and responsive to people's needs.

If all of us are on board with all of the elements of this outcome-focused approach, we will maximise the benefits for Scotland's children.

Second, *Getting it right for every child* provides the **how** for positive change within children's services: how we can adapt and streamline systems to deliver the Early Years Framework, Child Protection, Equally Well, Achieving our Potential, More Choices More Chances and much more. It is crucial to supporting the delivery of improved outcomes for children and young people, from the highest strategic decision-making to the smallest practical actions.

Getting it right for every child requires a positive shift in culture, systems and practice from the managers and practitioners who work in frontline services for children, young people and families. By working together in an integrated and consistent way where appropriate, we can expect significant benefits to accrue to organisations as well as children and young people. The evaluation of the Highland Pathfinder has provided us with good evidence of how *Getting it right for every child* can turn our aspirations for children into practice and some of the signs of these benefits and challenges that need to be addressed.

Colleagues across Scotland both in Community Planning Partnership areas and across agency boundaries are at quite different stages in the *Getting it right for every child* 'journey'. It is recognised that it will not be implemented in the same way or at the same pace in every part of Scotland, although many areas are already incorporating key elements of the approach into their planning and work with children and young people. One hallmark of this Government (evident in our devolution of financial control to local authorities) is respect for the knowledge and skill of local people in developing local solutions. Local structures and local solutions will always be necessary. However, the Values and Principles and Core Components and the National Practice Model are the foundation for positive change in every local area and if the anticipated benefits and improved outcomes are to be secured they need to underpin all local activity. Change will take time and the sooner a start is made on the *Getting it right for every child* journey by everyone involved the better.

I commend this Implementation Guide as a key document for people at all levels who are engaged in driving forward *Getting it right for every child* implementation. I look forward to the *Getting it right for every child* agenda advancing across Scotland to improve outcomes for all our children.



Adam Ingram Minister for Children and Early Years June 2010

Introduction

Changing systems

Changing practice

Implementing change

Changing culture

A Guide to Implementing *Getting it right for every child:* Messages from Pathfinders and Learning Partners

1. Introduction

Aim of the implementation guide

In 2008, the Scottish Government published *A Guide to Getting it right for every child*, which explains the approach, especially the Values and Principles, Core Components and the *National Practice Model*. This implementation guide builds on the 2008 guide and should be read with reference to it (see The Scottish Government 2008 *A Guide to Getting it right for every child*, Edinburgh, Scottish Government) (www.scotland.gov.uk/gettingitright).

This implementation guide shows what needs to be done by people at every level across all agencies and sectors to bring about the changes that are necessary to implement *Getting it right for every child*. It identifies essential culture, systems and practice changes and sets out what different people in organisations need to do to progress this agenda successfully. It provides strategic managers, operational managers and practitioners with examples of what works in practice gleaned from the experience of pathfinders and learning partners and summarises the features that make for successful implementation.

The implementation guide should also be read alongside the evaluation of the Highland pathfinder¹, which provides detailed evidence on what has worked in different aspects of implementation. There are also *Evaluation Themed Briefings*² developed from that report which give excellent information on particular aspects of development and implementation in Highland. We have highlighted examples from these materials. The *Getting it right for every child* website³ and the learning community⁴ also have a wealth of shared experiences, practice notes and other materials to give ideas about implementing *Getting it right for every child* in your area.

The guide has particular relevance for those who are leading change at different levels in their Community Planning Partnerships (CPPs). Such partnerships include local authorities, health boards, the police, fire and rescue services, enterprise agencies and transport partnerships. In addition to statutory partners, CPPs typically involve voluntary and private sectors. The

- ² Full references for these in section 9 (References)
- ³ www.scotland.gov.uk/gettingitright

¹ Stradling, B., MacNeil, M. and Berry, H. (2009a) *Changing Professional Practice and Culture to Get it Right for Every Child: An Evaluation Overview of the Development and Early Implementation Phases of Getting It Right For Every Child in Highland 2006 – 2009*, Edinburgh, The Scottish Government. See also Executive Summary Stradling *et al.* (2009b)

⁴ www.girfeclearning.scotland.gov.uk

guide is relevant to all those involved with children and young people and their families in children's and adults' services. It explains what chief officers in statutory agencies or in the voluntary or private sectors have found helpful in leading implementation. It provides information for strategic or operational managers and practitioners on their roles and responsibilities during implementation.

Partnerships will be at different stages of implementing *Getting it right for every child.* The guide can be used as a checklist by those partnerships which are well advanced in their journeys of implementation. For those in the earlier stages of development, it presents some of the **evidenced learning** to date from the pathfinders and learning partners. Essentially, *Getting it right for every child* builds on existing good practice and the trust and good relationships that have been built over time within and between agencies. The pace and way of implementing *Getting it right for every child* will vary across Scotland, allowing for local solutions to local issues. Whatever the route to implementation, the Values, Principles and Core Components must be respected and retained if the anticipated benefits and outcomes are to be secured

What Getting it right for every child achieves

Getting it right for every child is important because it improves outcomes for all children. It does this by creating a single system of service planning and delivery across children's services. It helps to create a positive culture of collaborative working, streamlines systems, achieving valuable savings, in time and resources and develops consistently high standards of practice. It builds on research and practice to help practitioners focus on what makes a positive difference to the lives of children and young people⁵ and to deliver improvements in line with the Concordat⁶. It is the approach which will help to deliver the Scottish Government's frameworks for social improvement: *Early Years, Equally Well* and *Achieving our Potential*. How agencies work together as well as individually will affect the way these outcomes are achieved.

Getting it right for every child:

- improves outcomes for children through doing things differently so as to make better use of existing resources
- involves children and families in decision making and respects their rights
- consistently identifies at an early stage children who need help
- increases the capacity of health and education to meet children's needs
- reduces paperwork and duplication of systems

⁵ See The Scottish Government (2008) *A Guide to Getting it right for every child*, Edinburgh, The Scottish Government (<u>www.scotland.gov.uk/gettingitright</u>)

⁶ The Scottish Government and Convention of Scottish Local Authorities (COSLA) (2007) *Concordat* between the Scottish Government and local government, Edinburgh, The Scottish Government and COSLA

http://www.scotland.gov.uk/Publications/2007/11/13092240/concordat

- draws help towards the child rather than passing the child from one service to another
- frees up staff time to take action that will improve the life chances of children and families.

The experience of the *Getting it right for every child* pathfinders and the learning partners is showing that, by being clear about what needs to be changed and taking a managed approach, we can transform the way things are done. In Highland, staff are reporting benefits. They say that:

- Children's needs are being identified at an earlier stage
- There is a shift towards the needs of more children being met within universal services as part of early intervention
- There are far fewer planning meetings
- Resources are being used in a more targeted way
- The young people and their families are now more likely to attend the planning and review meetings. More is done to ensure that their views are heard and, where possible, taken into account.

Children and families have reported positively on the changes, saying that:

- They feel they have a clearer idea of what is going on, what is intended and when it will happen. Overall, they are more included in the process of planning and getting help
- They have a clearer idea of what they can do to help their children They have a point of contact they can turn to when they have a concern (*Named Person*) and someone who has overall responsibility for their plan (*Lead Professional*) instead of going from one service to another to find out what is happening regarding different aspects of the support package.

These changes will be achieved only if all staff and agencies work towards putting the Core Components of *Getting it right for every child* into practice.

Achieving these changes takes time and commitment but the emerging evidence indicates that efficiency savings can be made through reduction in duplication, streamlining processes and clarity in roles and responsibilities.⁷ Pathfinder experience has shown that developing the all systems change required for introducing *Getting it right for every child* and embedding the necessary changes for implementation took around three years. Change is most effective when all the relevant agencies and sectors act together at the same time. In Appendix 2, there is an example of strategic and operational governance structures for integrated children's services within *Getting it right for every child*, showing the relationship between the key players in implementation.

Change of this nature and magnitude is challenging for everyone concerned and needs careful management to overcome resistance. Fears and anxieties

⁷ Briefing on cost benefits analysis in preparation

will surface in implementing *Getting it right for every child* but experience has shown they can be managed. The tension between the old and the new approaches will go on throughout the process of change and is a necessary part of the process. Change will also be incremental. The different pace of change has to be managed, and sustained encouragement offered.

Leadership at all levels is important. Strategic leadership is crucial throughout, particularly in the early stages and is a pivotal part of the change process. Operational leadership becomes critical at the point at which practitioners are being asked to make changes to their practice. All leaders need to inspire their staff, be brave enough to take things forward, and support individuals along the way who are at different points of the journey.

The Core Components of Getting it right for every child

Getting it right for every child is founded on 10 Core Components⁸, which can be applied in any setting and in any circumstance. They are at the heart of the approach in practice and provide a benchmark for managers and practitioners who are implementing *Getting it right for every child*.

The Core Components reflect and build on existing good practice across all children's services. Implementing *Getting it right for every child* fully in every Community Planning Partnership will necessitate long term commitment to changes in culture, systems and practice, as evaluation has shown⁹.

	The Getting it right for every child Core Components
1.	A focus on improving outcomes for children, young people and their families based on a shared understanding of well-being
2.	A common approach to gaining consent and to sharing information where appropriate
3.	An integral role for children, young people and families in assessment, planning and intervention
4.	A co-ordinated and unified approach to identifying concerns, assessing needs, agreeing actions and outcomes, based on the <i>Well-being Indicators</i>
5.	Streamlined planning, assessment and decision-making processes that lead to the right help at the right time
6.	Consistent high standards of co-operation, joint working and communication where more than one agency needs to be involved, locally and across Scotland
7.	A <i>Lead Professional</i> to co-ordinate and monitor inter-agency activity where necessary
8.	Maximising the skilled workforce within universal services to address needs and risks at the earliest possible time
9.	A confident and competent workforce across all services for children, young people and their families
10.	The capacity to share demographic, assessment, and planning information electronically, within and across agency boundaries, through the national eCare programme where appropriate.

⁸ The Scottish Government (2008) *op.cit.* p.14

⁹ Stradling *et al.* (2009a) *op.cit.* p.131

The first stage of implementation

Implementing *Getting it right for every child* necessitates transformational change. It requires agencies and individuals to examine all processes, procedures and their culture to determine what existing systems and practice can be built upon and what needs to change or be replaced.

Leaders of children's services need to agree and adopt a common strategy of how they want to improve the lives of children and families in their area. This should reflect the agreed national outcomes under the Concordat that all Scotland's young people should be successful learners, confident individuals, effective contributors and responsible citizens. To achieve this children and young people should be safe, healthy, active, nurtured, achieving, respected, responsible and included. These are the 8 *Well-being Indicators* in the *Getting it right for every child approach*.¹⁰ Leaders need to work together to translate their vision into reality.

As part of working with the Scottish Government to develop and refine *Getting it right for every child*, the pathfinders and learning partners agreed to take a robust managed and structured approach to implementation. Change has to be managed in terms of aims, objectives, timescales, communication, issues and risks, which should ensure that all aspects of this major change agenda are addressed. Strategic managers will then be able to see the progress being achieved and support this through governance.

Lanarkshire's experience confirms that there are several steps in beginning to implement *Getting it right for every child:*

- Understanding individual and shared strategic priorities
- Understanding strengths and positive building blocks
- Understanding the starting point for implementation
- Identifying the business benefits for each service
- Programme management and measurement.

Supporting practice through Getting it right for every child

Getting it right for every child aims to create a network of support around the child to promote well-being¹¹. This network will always include family and/or carers and the universal health and education services. Where there are concerns about children's well-being, the *National Practice Model*¹² is designed to help practitioners to pick up those concerns appropriately and deal with them in a timely and proportionate way. Sometimes this can be done through a single agency; at other times, because of the complexity of the child's situation, a multi-agency response will be necessary. Where risks are acute, the response will need to be rapid first of all to keep the child safe.

¹⁰ See The Scottish Government (2008) *op.cit* p.20

¹¹ The Scottish Government (2008) *op.cit* p.20

¹² The Scottish Government (2008) op.cit p.20

What we know is everyone in agencies and sectors, from chief executives and chief officers to practitioners has a part to play in successfully implementing *Getting it right for every child*.

What we know works for chief officers/strategic managers and leaders:

- Understanding individually, and as a group, the *Getting it right for every child* Core Components and the Values and Principles
- Being committed and demonstrating strong leadership in order to drive forward the change from the front through policy, strategy and performance monitoring
- Facilitating mapping business processes to understand what needs to change
- Understanding where the risks lie as changes take place and having a strategy for managing those risks
- Ensuring all relevant lead agencies are represented on a chief officers' implementation group that shares accountability and responsibility as well as representing each others' interests
- Appointing a dedicated change manager at a senior level
- Promoting the establishment of single agency and/or inter-agency reference groups involving key stakeholders throughout implementation
- Setting up an inter-agency implementation team
- Selecting people with the right skills for project and programme management
- Developing and supporting a training strategy that will also raise awareness and will meet the needs of single agencies and the interagency agenda for implementing *Getting it right for every child*
- Being aware how Getting it right for every child implementation impacts on their services and fits with other major areas within the chief officer's responsibility
- An understanding of the resource implications for implementation and the benefits.

What we know works for operational managers:

- Understanding the *Getting it right for every child* Core Components, Values and Principles and the *National Practice Model* and the business benefits that will accrue from its implementation
- Understanding how *Getting it right for every child* integrates into front line practice and what is expected of staff
- Knowing their responsibilities in terms of single and inter-agency leadership
- Confidently managing change and supporting staff through practical difficulties
- Ensuring the implementation plan is based on an understanding of current business processes
- Having a mechanism to understand and include views or feedback of key stakeholders, including children, families and the voluntary sector in the planning processes
- Creating opportunities for front line staff to resolve practical difficulties

- Being familiar with the current training plans (single and inter-agency), and how the needs of their team are being met through the training plan
- Having mechanisms in place to monitor and evaluate the implementation process
- Understanding the costs and benefits
- Considering how their role as change champions alongside that of others complements the implementation plan.

What we know works for practitioners:

- Having an understanding of *Getting it right for every child* Core Components, Values and Principles and the *National Practice Model*
- Fully understanding the roles of the *Named Person*, the *Lead Professional* and the concept of the single *Child's Plan*¹³
- Knowing where their responsibilities begin and end and understanding how to access help for children and families from other agencies
- Knowing what training is needed to support understanding *Getting it* right for every child and its role in promoting children's well-being
- Articulating their worries about implementation and what help they need in order to understand what to do and when to do it
- Having access to change champions and mentors to support them in implementing *Getting it right for every child*
- Building on elements of current good practice across agencies and knowing what will need to be different
- Being aware of how children and families experience their practice differently
- Recognising how colleagues across different agencies experience their practice differently.

Getting it right for every child in the wider policy context

Getting it right for every child threads through all existing policy, practice, strategy and legislation affecting children, young people and families.

The Values and Principles and Core Components of *Getting it right for every child* may be thought as the cross-weaving and recurring pattern of a tartan threading through a range of crucial national policy, legislative and practice developments. Some developments predate *Getting it right for every child* while others are in progress now.

There is value in recognising congruence, shared principles and binding patterns of good practice. In such a rich weave of connections, some will perceive knots, gaps and tensions between policy, legal and practice developments and the *Getting it right for every child* approach. For this reason we have symbolised connection and compatibility in a series of papers organised under the headings of the *Well-being Indicators*. Hyperlinks are embedded in the web version of the *Well-being Indicators* diagram below¹⁴.

¹³ See Scottish Government (2008) *op.cit*

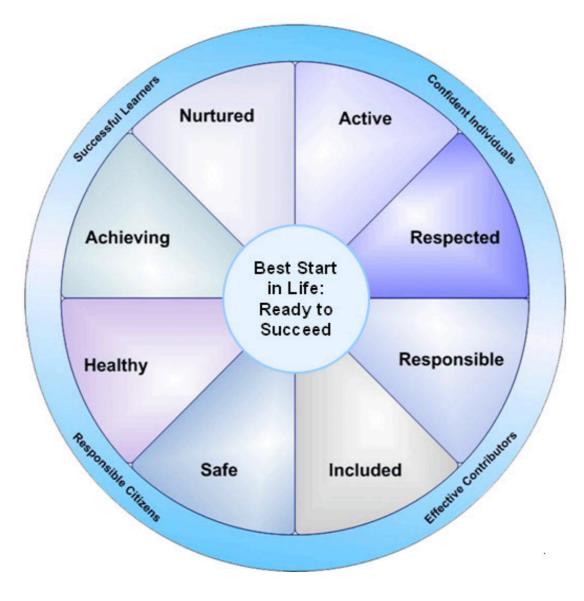
¹⁴ See <u>www.scotland.gov.uk/gettingitright</u>

These lead to thematic papers which give examples (rather than an allinclusive list) of connections between policies, legal developments and service initiatives and the concept of each child's well-being within the *Getting it right for every child* approach.

The thematic papers accessed via the hyperlinks also illustrate how a focus on outcomes based upon the *Well-being Indicators* can draw a broad range of inter-agency planning and action towards the following fundamental national outcomes:

- Our young people are successful learners, confident individuals, effective contributors and responsible citizens
- Our children have the best start in life and are ready to succeed
- We have improved the life chances for children, young people and families at risk¹⁵.

The Getting it right for every child eight Well-being Indicators



¹⁵ The Scottish Government and COSLA (2007) *op.cit*



Implementing change

Changing Systems

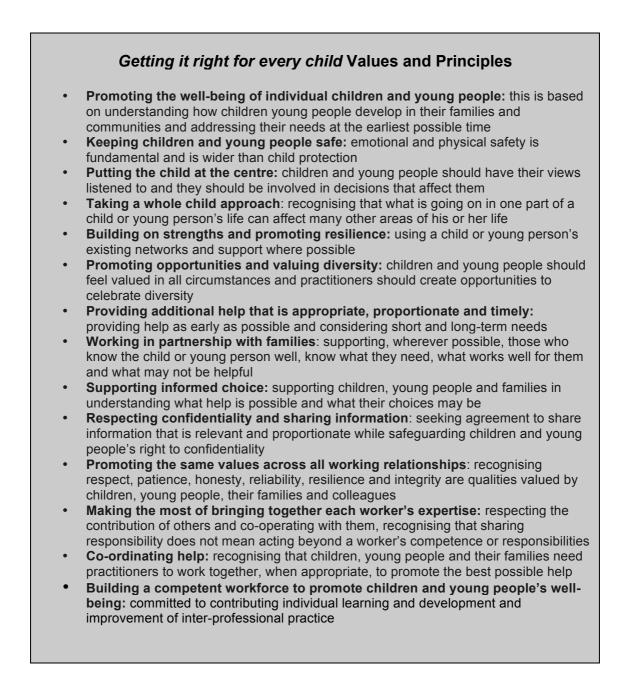
Changing Practice

Implementing change

Changing culture

2. Implementing change

Getting it right for every child is underpinned by Values and Principles that have been developed from knowledge, research and experience:¹⁶ They reflect the rights of children spelt out in the United Nations Convention on the Rights of the Child (1989)¹⁷ and the Scottish Children's Charter (2004).¹⁸



¹⁶ The Scottish Government (2008) *op.cit.* pp.15-18

¹⁷ United Nations (1989) Convention on the Rights of the Child, Geneva, United Nations

¹⁸ Scottish Executive (2004) *Protecting Children and Young People: the Charter*, Edinburgh, Scottish Executive

Implementing *Getting it right for every child* and its Values and Principles brings changes in culture, systems and practice.

What do we mean by culture, systems and practice?

Culture

Culture consists of the prevailing values both within an agency and among individuals working within this agency. It also includes operating principles, what usually happens, and ways of co-operating across agencies and services which support systems and practice. The behaviours and actions of every individual and organisations will create a culture conducive to implementing *Getting it right for every child*. Leaders at all levels have a special role in shaping culture.

Systems

Systems underpin the key tasks of an agency. They are the way in which structures, policies, procedures, and protocols, IT systems, and business processes support stakeholders and strategic managers to plan, guide and co-ordinate help for children and families.

Practice

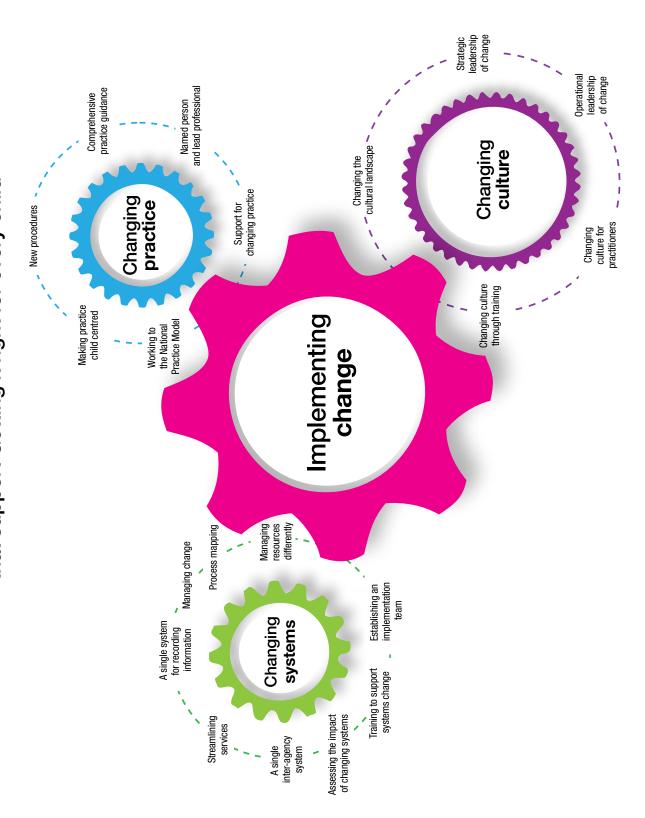
Practice is the repertoire each agency has of working with children and families and with other agencies and practitioners. It involves the skills, competence and confidence of the workforce, as well as clear roles and tasks expected from individuals. Integrated working is an essential part of effective practice in children's services. Practice also includes the theory, knowledge and use of appropriate tools to help in assessment, planning and activities. Effective practice focuses on actions to improve outcomes for the child or young person.

Illustrating changes in culture, systems and practice

The diagram on the next page is a graphic representation of the main kinds of changes that need to take place. It shows how the three areas of culture, systems and practice change all need to be addressed together to drive the changes that support the *Getting it right for every child* approach.

Changes in culture, systems and practice

How the three areas need to be addressed together to drive the changes that support Getting it right for every child



The impact of implementing Getting it right for every child

Changing culture, systems and practice offers children and families a way of helping them that is based on *Getting it right for every child* Values and Principles and Core Components. As the Highland evaluation suggests, change will not occur with a big bang but will take place over time. However, although it has only been two years since *Getting it right for every child* was introduced as an all systems change in Highland in one locality, there is evidence from the evaluation of the impact of implementing the programme. It is not possible within the scope of this guide to detail these changes but there are many examples in the *Evaluation Themed Briefings* and the evaluation of the implementation of the the implementation 8. Here is a flavour of the changes that have occurred.

The impact of implementing Getting in right for every child

- Children and families are getting a more appropriate, timely and proportionate service.
- More children and young people with concerns or unmet needs are receiving appropriate and proportionate support within universal services or are receiving targeted interventions for shorter periods of time.
- The quality of the information being shared across children's services has improved significantly over the course of the pathfinder phase.
- Improved inter-agency information sharing is also leading to a more comprehensive picture of each child and his or her unmet needs and this, in turn, is increasing the likelihood of the support offered being more appropriate and proportionate.
- Professionals in the pathfinder area are reporting that systematic information sharing across the agencies is reducing the likelihood of children at risk "going off the radar screen" even when their families move frequently or cease to engage with specific services.
- Schools, health visitors and social workers have reported that they appreciate the early warning system that the Child's Concern Form provides and that this is enabling them to put in place additional support for the child at an earlier stage before concerns and difficulties become more entrenched.
- Social work services have reported a marked reduction in referrals to them for general support for individual children and families, which would indicate a gradual shift to more children with needs being held within universal services. This has also been reported within the universal services.
- There has also been a significant reduction in the number of non-offence concerns referred to the Children's Reporter in the Highland pathfinder as a result of more effective screening and more evidence-based decision-making.
- Police and children's services are working more closely together to ensure that the concerns and unmet needs of more and more children and young people who have not committed an offence are being dealt with more quickly and appropriately.

- Social work, the schools and health have had to produce fewer reports for the Children's Reporter.
- Planning meetings about individual children are now more likely to be concerned with addressing the needs of the whole child rather than just the needs or concerns that have been prioritised by the individual service which first raised a concern.
- There is growing evidence from the evaluation that the professionals designated as Named Persons within universal services are identifying unmet needs at an earlier stage and this is enabling the necessary support to be put in place for the child much more quickly.¹⁹

¹⁹ Adapted from MacNeil, M. and Stradling, R. (2010) Evaluation Briefing 6, Green Shoots of Progress, pp. 8-9.



Changing culture

3. Changing culture

Changing the cultural landscape

Changing direction to embed the *Getting it right for every child* approach focuses on institutional and individual values, operating principles, norms and ways of co-operating across agencies and services. These changes in culture will support changes in systems and practice.

As the Highland evaluation has shown, cultural change will take place at two levels:

- The distinctive professional culture of each children's service and agency
- The inter-professional working culture to support inter-agency working across children's services.

Each service and agency tends to be characterised by a professional culture with recognisable elements. These elements determine what it is to be a professional within that particular occupation.

There is also an inter-professional working culture. The *Getting it right for every child* Values and Principles and Core Components provide a bedrock for inter-agency collaboration. Along with the *National Practice Model* (see section 4) these will support a common language and a shared understanding of children's well-being.²⁰

Changing culture in Lanarkshire

Lanarkshire has found that culture change is about behaviour, actions and language. Cultural change will only be achieved by involving everyone across the whole workforce in a programme of understanding and positively influencing change. What is needed are commonly agreed principles, ways of operating and help from managers to break down barriers or dispel misconceptions. It is about actively developing understanding of each other including the different roles, contributions and supports people can offer. It is also about working co-operatively together in the interests of children young people and families rather than on status, budgets and targets.

Strategic leadership of change

Getting it right for every child requires the development of a positive culture across all services and agencies. It is critically important that the vision on which it is founded is clearly understood at strategic and operational levels.

Chief executives and chief officers in every agency and in every sector individually and collectively need to buy into *Getting it right for every child* by

²⁰ Stradling et al. (2009a) op.cit) pp.80-81

promoting the vision, Values and Principles and the implementation strategy and plan. Without this it is unlikely that operational managers and practitioners will feel confident to commit to implementation.

The need for strong leadership from chief officers

The pathfinder and learning partner experiences show that strong leadership and the commitment of chief officers working together should be in place from the outset, including the commitment of elected members. Otherwise, practitioners are more likely to view the change as yet another passing initiative (see Appendix 2 for an example of governance structures that will support implementation). Strategic leadership should be adapted to suit local structures. One tangible way to demonstrate the strengthening of partnerships is to pool resources and budgets. Overarching commitment from senior leaders and a culture of co-operation provides service managers and practitioners with the authority to implement changes in the direction agreed.

Changing the culture will inevitably affect structures, systems and practice. The experience of pathfinders and learning partners shows that decisions impacting on outcomes for children are taken in a number of different forums and partnerships. The strength of a *Getting it right for every child* culture will affect the way children and families experience services. Chief officers play a vital role in shaping the direction of services by ensuring that the strategy for all services that affect children and families are consistent and coherent with the *Getting it right for every child* approach:

- in forums for consulting children and families
- in each of the single agencies
- in the voluntary and private sectors
- across Community Planning Partnerships with full participation of the voluntary and private sectors
- in achieving Single Outcomes in the Concordat between COSLA²¹ and CPPs, and
- in delivering major policies such as *Early Years Framework, Equally Well, Curriculum for Excellence, Achieving our Potential, The Road to Recovery*, reforms to the Children's Hearings and revision of child protection guidance.²²

What makes a difference:

• Chief officers demonstrating a clear understanding and both individual and collective commitment to the *Getting it right for every child* vision, as well as the Values and Principles

²¹ The Scottish Government and COSLA (2007) op.cit

²² See section 8 References

- Chief officers working closely together across the agencies from the outset to show overarching strong leadership thereby giving operational managers the confidence and authority to implement change at local level, including realigning finances as necessary
- Senior leaders ensuring they feed in the perspectives of their own sector to the collective strategy for change
- Chief officers and elected members individually and collectively ensuring that strategies affecting children and families are consistent and coherent across all agencies.

Operational leadership of change

If the cultural landscape across children's services is to change to a *Getting it right for every child* approach, operational management must play a key role not only in initiating the change but also in embedding it in systems and practice. Just as it is essential for strategic leaders to work together, so it is essential for other levels of management to take an integrated approach and to demonstrate how their own agency fits into this way of working.

By actively engaging themselves in leading the implementation of the *Getting it right for every child* changes, leaders give confidence to practitioners. Managers can also be mentors, supervisors and champions themselves or can contribute to a culture that values and uses these roles to support practitioners through the challenges of change.

Good managers have an important role to play in picking up and addressing misunderstandings and misinformation that may be circulating within their teams and departments that may be creating barriers to change. How practitioners' worries about change are managed is critical to everyone being enabled to implement *Getting it right for every child*.

Local managers from different agencies must work together, all using the same approach to assessment and planning. This gives confidence to practitioners that there is a joined up approach and will help to cascade *Getting it right for every child* to front line workers. This also helps to develop a culture of co-ordinated working.

What makes a difference:

- Operational managers giving staff the confidence to embrace change by ensuring access to training, good supervision and support, peer mentoring and by identifying champions within their agencies
- At a local level, operational managers being clear about working together across agencies to embed the *Getting it right for every child* approach into systems and practice
- Operational managers acting quickly to address misunderstandings and misinformation amongst practitioners
- Operational managers demonstrating their ownership of change locally

• Operational managers reinforcing senior managers' commitment to change at all levels.

Changing culture for practitioners

The primary aim of practitioners who are implementing *Getting it right for every child* is to improve the well-being of children. Ensuring that children, young people and their families are encouraged to express their views and that these views are listened to is fundamental to an inclusive approach. It is also important that children and families know that agencies are working together to help them. In order to support practitioners to give a coherent service to children and families, managers need actively to promote an interprofessional working culture.

Creating an inter-professional working culture

The emergence of an inter-professional working culture that operates alongside service-specific professional cultures does not just happen when new practices are introduced. It needs to be planned for and managed. This kind of development needs to be built into the *Getting it right* implementation plan and any awareness raising and training programmes. Quality assurance and auditing mechanisms are needed to provide systematic feedback to practitioners and establish benchmarks of what represents professionalism within the context of integrated working.²³

Experience of implementation has shown that there are two parallel shifts in professional culture:

- First, practitioners begin to take an holistic approach with children by keeping in mind the whole child in order to work effectively. Some may need help and reassurance to make this change
- Second, practitioners working together in a whole child approach begin to move away from the use of labels such as pupil, young offender or looked after child, in order to see the child holistically.²⁴

Changes are progressed by adhering to the *National Practice Model*.²⁵ The common language of assessment and planning using the model is an essential part of changing the culture of practice. Experience shows that where the common language is being used across services, reference to tariffs, thresholds and referrals is diminishing in inter-agency and inter-professional discussions.²⁶

²³ Stradling *et al.* (2009a) *op.cit* pp.87-88

²⁴ See Stradling et al. (2009a) op.cit pp.81-82

²⁵ The Scottish Government (2008) *op.cit.* pp.22-30

²⁶ Stradling *et al.* (2009a) *op.cit* p.83

There are challenges for practitioners in moving away from what they may see as traditional roles, responsibilities and identities. This demands a high degree of inter-agency trust and the systematic development of positive relationships. *Getting it right for every child* has made a significant change in Highland by enabling voluntary and private sector providers to be genuine partners on an equal footing for the first time.

Practitioners need to develop a culture of sharing and valuing the expertise and skill of others across all sectors, but operating within the Values and Principles of *Getting it right for every child*. The diversity of competence, knowledge and skills is an essential component of a *Getting it right for every child* culture and contributes to achieving better outcomes for children. Lanarkshire has found that practitioners have benefited in investing time in finding out what others do, understanding their roles and core functions and modelling inclusive behaviours that encourage an equal partnership.

What makes a difference:

- Practitioners having reassurance from their managers
- Practitioners taking a whole child approach to their own practice and in working with others, whilst retaining their own expertise
- Practitioners understanding and using the National Practice Model
- Practitioners having access to quality training and being given time to adapt their practice to feel confident in the new way of working
- Practitioners feeling confident in their own professional expertise and valuing that of others
- Practitioners feeling confident that they can contribute to achieving better outcomes for children effectively.

Changing culture through training

Training is a fundamental part of changing culture, just as it is for changing systems (see section 4) and practice (see section 5). It is an integral part of the change process and cannot be done as a one off event. The time training will take depends on each agency's starting point for implementing *Getting it right for every child* but in every case, the development and support of an overall training strategy as part of the implementation plan is necessary. Account needs to be taken of the ongoing training needs of staff, particularly in relation to embedding and sustaining cultural changes. The strategy needs to incorporate basic and continuing training to ensure comprehensiveness. This includes thinking about the training needs of the voluntary and private sectors and their involvement in multi-agency training.

Training should lead to the Values and Principles and the Core Components of *Getting it right for every child* becoming part of day-to-day practice and the strategy needs to work towards this end.

Strategically linking training with communicating the progress on development and implementation helps give confidence to staff that steps to changing culture are being achieved. Experience from the Highland pathfinder and the learning partners has also found a modular approach to training to be useful, with modules that can be easily assimilated into an integrated training strategy. It is helpful to the change process if training can be demonstrably led and endorsed by strategic managers.

What makes a difference:

- A training strategy that takes account of the ongoing and long term need to train staff in order to embed Getting it right for every child into day-to-day practice
- Training that includes the Values, Principles and Core Components to support the embedding of *Getting it right for every child* into every day practice
- A training strategy that addresses basic and continuing training. This
 will help meet the needs of staff performing a variety of jobs and having
 different levels of knowledge, understanding and experience
- A modular approach that builds on awareness raising, and has modules on single agency and inter-agency working
- Ensuring that strategic management support for the change is evident through their demonstrable support for the training programme.



Changing systems

4. Changing systems

A fundamental aim of *Getting it right for every child* is to include children and families at every point. Redesigning systems to provide opportunities to include children and families needs to be at the forefront of change. This means examining structures, policies, procedures and processes within and across agencies to create a more streamlined way of working with a clear pathway for children and families to access help.

A system that promotes better information sharing using a common language benefits children and their families and enables them to be fully involved. To support the common language and understanding promoted by *Getting it right for every child* practice, information recorded in different systems needs to be as compatible as possible. Agencies should standardise how they record concerns, assessments and plans for children.

In order to develop more streamlined systems and processes, it is useful to map existing ones to identify where there are duplications, overlaps or gaps in the services provided to children. Mapping will allow partners to build on the best of the existing systems.

Process mapping

The mapping process in Highland had a number of aims, of which the primary ones were:

- To provide a baseline for change
- To map the paths which a child takes through a single agency, for example from universal or core support to specialist help once a concern or unmet need has been identified and then, where appropriate, to map that child's pathways into inter-agency support
- To highlight any areas of duplication that needed to be eradicated.
- To identify any barriers to the delivery of appropriate, timely and proportionate support
- To redesign the business processes in order to reduce any duplication and remove or circumvent any barriers that have been identified.²⁷

Process mapping also provides the opportunity to consult with children and families about their current experience and the kind of systems that they would find most helpful.

The experience of the pathfinders and the learning partners has shown that when the process mapping occurs and how it is done are important considerations. Getting these aspects right helps both management and staff

²⁷ Stradling *et al.* (2009a) *op.cit*, p.32

recognise the need for change, facilitates the winning of hearts and minds, and strengthens the buy-in to the changes.

When should process mapping take place?

Examples of process mapping

Highland used independent consultants after some of the changes in systems and practice had already taken place. The benefits of this were that it created a comprehensive map but the downside was that it necessitated large amounts of time and resources spent in explaining a whole range of issues and details to the consultants.

By contrast, the domestic abuse pathfinder and the learning partners did the mapping themselves, starting before systems had begun to change. In some of those local authorities, the mapping was kick started by an inter-agency event involving both managers and practitioners. Those involved had detailed knowledge of the working of current systems and the mapping enabled everyone to see what needed to change. This had the added value of consolidating leadership and working between and across agencies.

It is important that all the pathways used by universal, targeted and specialist services working with children and families, including those in the adult sector, are mapped to identify duplication and unnecessary bureaucracy.

Mapping should take place as early as possible in the development timetable, ideally at the outset of the change process. Being able to see the map helps to start the process of creating an inter-agency approach. It supports the streamlining and simplification of systems as well as encouraging buy-in to the need for change.

What makes a difference:

- Consulting children and their families about systems that would be helpful to them
- Beginning business process mapping as early as possible in implementing *Getting it right for every child*
- Using the knowledge of managers and practitioners to identify systems and good practice that can be built upon or are obsolete
- A business process mapping exercise that:
 - involves all partners including adult services that address parents' or carers' needs
 - o involves all levels of staff: strategic, operational and practitioners
 - maps a child's path through single agency universal support and into inter-agency support
 - o highlights duplication

- o identifies areas of good practice that can be built upon
- identifies barriers to the delivery of appropriate, timely and proportionate help
- provides a baseline for assessing changes in systems, practices and professional culture
- examines where processes can be made more accessible to children and their families.

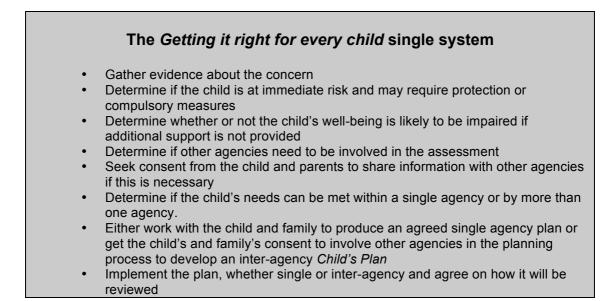
Establishing a single inter-agency system for helping children and families

Once the mapping has been done, the results can be used to design a rational and streamlined system. This means that all individuals, no matter which agency, will ask themselves the same five questions when they have concerns about a child or if children or families ask for help. These questions must always be underpinned by **listening carefully to what children and families have to say and seeking their views.**

The five questions practitioners need to ask

- What is getting in the way of this child or young person's well-being?
- 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?28

Where concerns are identified, a single system requires that a specific sequence of procedures and processes be followed by practitioners, using a multi-agency approach if necessary.



²⁸ The Scottish Government (2008) *op.cit.*, p.24

- Continue to ask if the child is at immediate risk and may require protection or compulsory measures
 - Review the plan, monitor the outcomes against the Well-being Indicators and modify the plan where necessary
 - Continue to monitor as appropriate. ²⁹

At every stage, children and families should be fully involved.

What makes a difference:

- Using the process maps to identify and eliminate duplication and unnecessary processes that may be barriers to integrated working
- Developing a single system to respond to concerns so that all staff ask the same 5 questions
- Underpinning these 5 questions by listening to children and families and seeking their views
- Establishing a single assessment process that gathers information and makes sense of the impact of the risks and needs on the child's development
- Ensuring that the system results in a single plan, that is **one child, one plan**
- Identifying points in the single system where engaging and consulting children and their families might be improved.

Streamlining services

All those working with a child should contribute to an assessment and together they should agree a single *Child's Plan³⁰* co-ordinated by a *Lead Professional* where multi-agency action is necessary. The plan should be managed in a single forum, even if a range of statutory issues is relevant. The *Child's Plan* takes into account all aspects of a child's life, using the *National Practice Model* and incorporating any specialist assessments, including assessments of risk.

With a single system, it is easier for children and families to access services without complex referral systems to different agencies. Pathfinder evaluation is also showing that universal services having easier access to early intervention support has helped to prevent the likelihood of more complex targeted services being needed later on.³¹ It has also been found that the common system promotes trust and respect for the professional expertise and judgement of colleagues in other services.

²⁹ Adapted from Stradling et al. (2009a) op.cit. p.33

³⁰ See The Scottish Government (2008) *op.cit.* p.30

³¹ Stradling et al. (2009a) op.cit

A single system of service delivery

When Highland redesigned their processes, they replaced them with a single system of service delivery in which all agencies agreed to respond positively to requests for support. The *Named Person* can negotiate with another agency directly to ask for an early intervention support service. Their assessment and plan is accepted and referral forms or further assessment are not needed.

The same process should apply to all children irrespective of the level of complexity, and planning for them should take place within a single system that continues to meet procedural and statutory requirements. For example, a child's name may be on the Child Protection Register and he or she may also have a Co-ordinated Support Plan. In such circumstances, where there are different requirements, the reviewing timescales are merged into one review.

What makes a difference:

- Developing the single system to create easy access to early intervention services
- Introducing the single *Child's Plan*
- Using the *National Practice Model* proportionately for all children, with flexibility for specialist input
- Aligning and merging meetings for a child who is the subject of compulsory measures or who has complex needs
- Adapting existing procedures, such as child protection guidelines, educational support for learning and plans for looked after children, to be within a *Getting it right for every child* approach
- Removing the need for another assessment when one agency has identified what a child needs and what is to be achieved.

Establishing a single system throughout agencies for recording information

Single agencies will keep their own professional records. For example, health visitors will record children's development. Schools will record a child's educational progress. When concerns have been noted, it is important that agencies clearly record what decisions have been made and by whom. Sometimes, there will be single agency records of specialist assessments to be incorporated. There will also be statutory recording requirements. Such information will, where appropriate, inform an integrated assessment and contribute to the single *Child's Plan*. For those children who need additional help, all agencies need to agree a single system and common language for recording and sharing information. This should be done by using the *National Practice Model* to structure and record concerns, gather information, analyse,

plan and review a child's progress. This is essential especially to facilitate the sharing of information across local boundaries.

What makes a difference:

- Using the common language of the *National Practice Model* to record concerns, information gathered, analysis, the plan and reviews
- Agreeing how decisions about any concerns are recorded and by whom
- Devising the single system of recording and sharing information that can incorporate records of specialist assessments
- Ensuring that agency records continue to meet the statutory or professional requirements of those agencies but contain information that can be incorporated into a *Child's Plan*.

Managing change

Pathfinders and learning partners have found it critical to appoint a senior officer, with experience of managing at a high level, to be responsible for the strategic direction of change. This strategic leader has an important role in leading change across **all** children's services. The senior manager provides the mechanism for getting full and active support from other senior stakeholders, including chief officers, elected members and staff. This person will ensure that there are effective links with strategic committees, council meetings involving elected members and other local, statutory and specialist bodies, such as the Child Protection Committee (CPC).

A second important post is that of the implementation team project manager who has sufficient seniority as well as the authority and experience to lead and implement the changes. This manager's role will be to develop the *Getting it right for every child* approach, lead the redesign of business processes, support the culture, systems and practice changes that are needed to implement the new way of working, and lead and manage the implementation team. The learning partners have appointed dedicated change managers to lead their own change programmes as a result of early learning from the pathfinders. This approach has been effective and vital to the success of implementation and has helped maintain focus and direction.

Because of the complexity of managing change across so many different agencies, the discipline of a structured project management approach to change management is essential. Such an approach provides the governance and structure to assist the process of decision-making, communication and managing risk.

The pathfinders and learning partners have pursued slightly different approaches with some setting up single agency reference groups and others multi-agency implementation groups. Both approaches can be successful so long as the most effective individuals are involved and take actions necessary to keep implementation moving forward. Every effort should be made not to reinforce 'silos'.

What makes a difference:

- Appointing a senior manager with authority to take responsibility across all agencies to lead the implementation of *Getting it right for every child*
- Appointing a dedicated project manager with experience and understanding of systems across local agencies to plan, co-ordinate, steer and promote the inter-agency implementation process and manage the implementation team
- Employing a project management approach to bring structure and discipline to implementation
- In taking a project management approach, developing clear governance and reporting structures
- Keeping implementation moving by involving key individuals and breaking down 'silos'.

Establishing an implementation team

The pathfinders and learning partners have all established an implementation team to support change. This has been found to be efficient in helping the implementation process.

Approaches to establishing an implementation team

In Highland, which had both a development and implementation remit, this was comprised initially of secondees from health, education, police and social work. It was further complemented by part time support from Scottish Children's Reporters Administration (SCRA), IT departments and later, by part time support from the voluntary and private sectors and adult services.

The learning partners' approach to setting up a change team was done in different ways. In one partnership, funding from two Community Planning Partnerships and an NHS board supported two development posts to the team. In a second learning partnership, a mixture of agency based secondments and support from inter-agency funding streams was used to support the implementation team. In a third, the change remit was carried by an existing children's services development team.

The experience of the pathfinders and learning partners has been that the implementation of such a major programme requires an implementation team with practice credibility to take the programme forward but this can be done in different ways.

The pros and cons of larger or smaller teams

A larger team

In Highland and Edinburgh, there has been a large team with service or implementation leads for each of the main agencies such as social work, health, education, police, Scottish Children's Reporter Administration (SCRA) and the voluntary sector plus other resources such as programme management, communications, IT and administration. Larger dedicated teams require more resources but can progress more quickly. Efforts must be made to maintain ownership within each agency to ensure that momentum will continue at the end of the resource team involvement.

A smaller team

Dumfries and Galloway, Falkirk, Clydebank and Lanarkshire have had a skeleton team of a programme manager, practice development team members and an administrator with service and implementation leadership coming from within services. The advantage of a smaller team is that it must rely on support from within the local partnership which is helpful in creating a sustainable approach and embedding *Getting it right for every child* into the remits of permanent posts. However, progress will be limited by capacity and can be slower with fewer dedicated staff.

As well as their role in inter-agency implementation of *Getting it right for every child*, implementation team members should also be able to support change in their own agencies or sectors through, for example, reference groups, managers and practitioner events. This dual role has been helpful in supporting two-way communication about developments in the single and inter-agency environments.

All team members need to have a shared view of *Getting it right for every child* Values and Principles and be clear about the changes that need to be made in *Getting it right for every child* culture, systems and practice. Without this shared view, fragmentation and misunderstanding can develop in and across agencies. This can contribute to unevenness in the pace of change so it is important to be prepared for differences and learn from those who are ahead.

What makes a difference:

- Establishing an implementation team with representatives from local agencies, including the voluntary and private sectors, as relevant to local circumstances
- In establishing the team, ensuring that team members have sufficient knowledge, experience and credibility and are confident enough to act as change agents to support change in their own agencies as well as in the multi-disciplinary forum

- Clarifying the remit and responsibilities of the dedicated team. In choosing the team.
- Ensuring the team shares an understanding of the Values and Principles, practice and culture changes and collaborative strategies necessary to implement *Getting it right for every child* in their area
- Ensuring the team members are managed by and are responsible to the project manager
- Recognising and managing the different pace of change across agencies.

Training for the implementation team to support systems change

Ensuring that there is an induction programme for implementation team members and that there is access to training about *Getting it right for every child*, including how the approach supports other policies, is critical. Examples may be found on the learning community³². It may seem obvious but the team must share a common understanding of how changes in culture, systems and practice may be implemented in their local areas. This includes being familiar with the evidence that underpins the *Getting it right for every child* approach³³. Without this, team members may find it less easy to convince those who are sceptical that the changes will be worth the effort, with the result that the project could lose credibility.

It has been found helpful for team members to know the theory and practice of project management and how to use the project management tools effectively. Without such structure, experience has shown that activity can become disorganised, timescales slip and the successful delivery of the project can be put at risk.

Training should equip team members with an understanding of the psychology of organisational change³⁴ and the skills to work effectively with others at all levels. This understanding helps them manage change effectively and avoid becoming disheartened when faced with inevitable barriers. Throughout the course of implementation, the team will need to develop and deliver training programmes. They may need support to develop the skills to do this.

What makes a difference:

• Creating an induction programme and other opportunities to enable the implementation team to understand *Getting it right for every child*

³² See www.girfeclearning.scotland.gov.uk

³³ See Aldgate, J. (2008) Why Getting it right for every child makes sense in promoting the well-being of all children in Scotland, Edinburgh, The Scottish Government <u>www.scotland.gov.uk/gettingitright</u>

³⁴ See, for example, Weisbord, M.R.(1991 *Productive Workplaces: Organising and Managing for Dignity, Meaning and Community*, San Francisco CA, Jossey-Bass. Also chapters by Barnes and by Pine and Healy in Aldgate, J. *et al.* (eds). (2007) *Enhancing Social Work Management: theory and best practice from the UK and USA*, London, Jessica Kingsley Publishers

- Ensuring the team has training on using a project management approach
- Supporting the team through training to understand the psychology of organisational change and develop skills to work effectively at all levels
- Training the team to deliver high quality training.

Managing resources differently

Part of changing *Getting it right for every child* culture and practice is helping everyone to trust each other's professional judgement and expertise and to understand that their core responsibilities and skills will not be diffused by the *Getting it right for every child* approach. The new systems should underpin these changes in attitudes and practice and promote collaboration, not only between agencies but also with children and families. This includes setting up policies and procedures on the allocation of resources, developing pooled and jointly managed budgets and improved protocols. Agencies should strive towards allocating resources to a child, rather than to a geographical area, based on assessment of need. If a child moves, resources should follow the child.

As part of its toolkit and guidance, Edinburgh has developed a Memorandum of Understanding between³⁵all agencies to co-operate on assessment of needs and risks, planning and actions. Highland has found it helpful to have procedural clarity about how resources are used to meet children's additional needs, especially to promote effective early intervention. This has entailed a realignment of budgetary responsibility. For example, funding was devolved to the Integrated Services Officer (ISO) in support of early multi-agency help with minimum bureaucracy.

What makes a difference:

- Designing systems that put children and families at the centre
- Promoting improved joint co-operation and trust across the agencies through formally setting out what is expected by all stakeholders
- Reassuring practitioners that their core responsibilities and skills will not be eroded by applying the *Getting it right for every child* approach
- Ensuring senior managers collaborate to see how resources can increasingly be jointly managed to reflect a more integrated approach
- Reviewing and redesigning budgetary responsibilities and procedures in order to promote early intervention with minimum bureaucracy and to remove any barriers to help being provided quickly.

Assessing the impact of changing systems

Experience has shown the value of establishing mechanisms from the outset to monitor and evaluate how *Getting it right for every child* is being put into

³⁵ See www.girfeclearning.scotland.gov.uk

practice. This is important during the implementation phase in order to identify where tools and processes are not being used appropriately.

First, all managers have an important role to play in collecting the right data, measuring changes, evaluating and reviewing,³⁶ especially at operational level. In Highland, it was found helpful to put in transitional quality assurance mechanisms to establish a benchmark for measuring changes in practice. Examples of these were random sampling of case records and joint auditing of children's plans. It was also found that these transitional measures should not become so embedded that they form barriers to streamlining processes and practice.

Second, the pathfinders and the learning partners have all seen benefits to implementation by building in opportunities for single and inter-agency professional 'best practice' and focus groups to meet regularly to reflect on the new approach, to learn from each other and to enhance the common application of *Getting it right for every child*.

A third important aspect of assessing the impact is to review outcomes for individual children. For children who have complex needs, Highland, for example, has developed a system in which independent Quality Assurance and Reviewing Officers take on the role of monitoring whether outcomes have been improved. These officers have oversight of a *Child's Plan* for children who have high level needs, including those children whose names are on the Child Protection Register, are the subject of compulsory measures, or who have Co-ordinated Support Plans. They also chair the *Child's Plan* meetings for those groups. Lanarkshire and Edinburgh are also developing similar systems.

Tools to support self-evaluation of children's outcomes by agencies are being developed by the Scottish Government over 2010-11 as part of *Getting it right for every child* implementation.

What makes a difference:

- At the outset, introducing transitional mechanisms to monitor how *Getting it right for every child* is being implemented at operational level but also making sure these do not become permanent
- Creating opportunities for practitioners to reflect on improved practice
 and to learn from each other
- Taking a systemic approach to the oversight and measurement of whether the outcomes for children are being improved.

³⁶ Stradling, R. and MacNeil, M. (2010), Evaluation Briefing 8, *The Impact on Services and Agencies Part 2: Resource Implications*, Edinburgh, The Scottish Government



Changing Practice

5. Changing practice

As *Getting it right for every child* applies to every child in Scotland, changing practice needs to build on the Values and Principles and the Core Components.³⁷ Promoting children's well-being through early intervention and prevention are equally important as responding to children who are vulnerable and in need of protection. The experience of pathfinding and learning partners has suggested there are a number of building blocks that have helped change practice:

- Making practice child centred
- Working to the National Practice Model
- New roles
- New streamlined procedures
- Support for changed practice
- Comprehensive guidance
- A clear understanding for everyone concerned about what the changes mean for them.

Making practice child centred

Many practitioners already adopt practice that puts children and their families at the centre. *Getting it right for every child* practice is built upon this principle. Practitioners should think creatively about ways of consulting children and families and involving them every step of the way. They should listen to what children and families say will help them most and incorporate that feedback into developing good and effective practice. This is an area where the voluntary and private sectors are often well-placed to contribute their expertise and experience. The Highland Children's Forum made a significant contribution to showing how children's views could be gathered.³⁸ Lanarkshire have similarly taken into account children's views.

Making practice child centred is not confined to children's services. Adult services have a significant part to play in ensuring children's needs are met when they are working with adults who are involved in children's lives.

The Link-Up Initiative in Angus

The Montrose Link-Up Initiative in Angus is an example of effective joint working between the alcohol and drugs services for adults and children's services at policy and practice levels. While the overall aim of the Link-Up Initiative is to identify, support and protect children affected by parental

³⁷ The Scottish Government (2008) op.cit. p.14

³⁸ See Highland Children's Forum (2009) *What makes a good life? Views of some young people with additional support needs, Summary Report*, Inverness, Highland Children's Forum http://www.highlandchildrensforum.org/userfiles/file/summary%20camhs%20report%2009%20smallv

^{5.}pdf

substance misuse, it is in essence a change project, aiming to change the way professionals in all agencies work, but in particular, those providing services for adults who misuse alcohol and drugs.

The initiative has some commonalities with the Domestic Abuse pathfinders which also focus on services provided to adults: those who are victims or perpetrators of domestic abuse. The Link-up Initiative and Domestic Abuse pathfinders share a common aim in that their key concern is to address harmful parental behaviours, and ameliorate their impact on children.

What makes a difference:

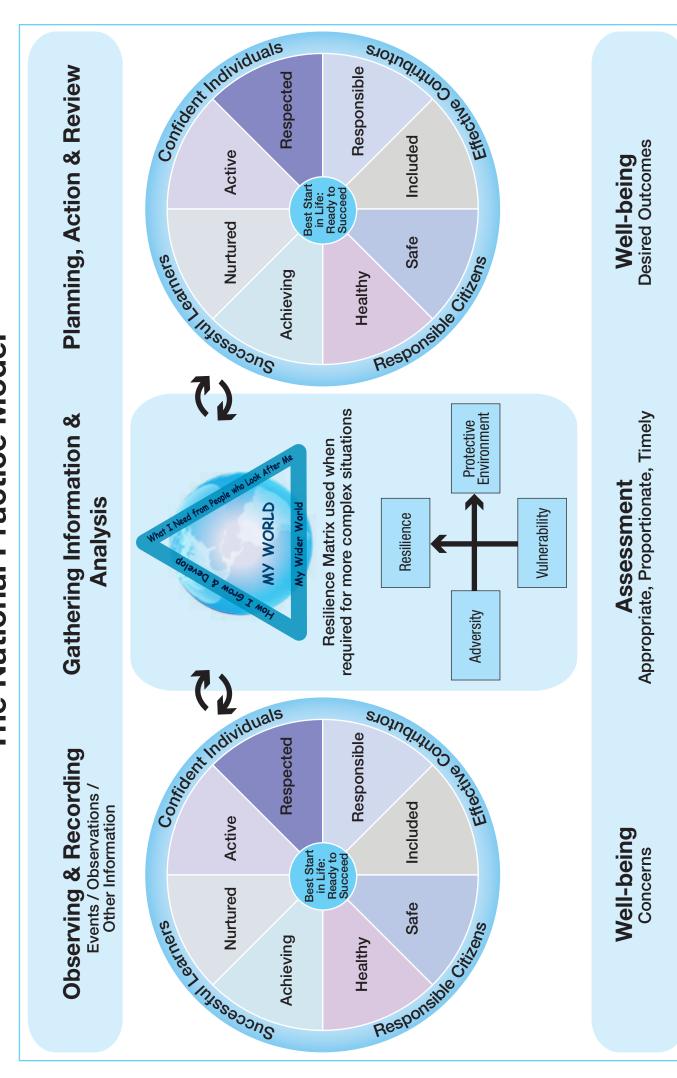
- Embedding the processes of consultation and engagement with children, young people and families in the everyday practices of each agency and inter-agency working
- Embedding feedback mechanisms from service users into ongoing self evaluation and quality assurance processes
- Ensuring that families, children and young people are being listened to when new practices, procedures and tools are being designed and piloted
- Ensuring that good practice in engaging with children, young people and families becomes the norm
- Ensuring that staff have the skills and the tools to engage effectively with children and young people when seeking to find out what is concerning them and how best to help and support them³⁹
- Using training and supervision to reinforce the importance of a child and family centred approach.

Working to the National Practice Model

The *National Practice Model* is an evidence based approach to practice⁴⁰ and should be used in recording, assessment, planning and review for children who need help either in a single or a multi-agency context. It has incorporated the development work around an Integrated Assessment Framework by retaining the My World Triangle as part of the model. The National Practice *Model* has been developed from theory and research and provides the foundation for every practitioner in all sectors.

³⁹ The Scottish Government (2008) Early Years Framework: Priorities for Action, Edinburgh, The Scottish Government

http://www.scotland.gov.uk/Publications/2009/01/13095148/0 ⁴⁰ See Aldgate, J. (2008) op.cit



The National Practice Model

The benefits of the National Practice Model

The Highland evaluation has found that the *National Practice Model* has standardised an evidence based approach to practice:

...a sizeable and growing group of practitioners (mostly those who have been trained and get regular opportunities to apply the practice model) are using these processes to make professional judgements that are based on evidence which can be reviewed by others in terms of its soundness, the way in which it was interpreted and the validity of the conclusions that were drawn.⁴¹

As part of implementation, all agencies will need to adopt the *National Practice Model* in their work with children and families, in a way that is in line with their core responsibilities. For example, police have a distinct role to record concerns and share relevant information with other agencies, using the *Well-being Indicators*.⁴² It would be unusual for them to go on to lead an assessment. By contrast, those from health, education and social work services and some voluntary and private sector agencies must be prepared to use the whole *National Practice Model*⁴³ in their work with children and families. This will be done proportionately according to child and family circumstances. It will enable knowledge about the children and families to be share with and understood by practitioners from across Scotland.

What makes a difference:

- Using the evidence based *National Practice Model* to provide information that can be understood and reviewed by others
- Sharing a common language by using the *National Practice Model*
- All agencies and sectors examining their recording tools, processes and practice and aligning them so they can use the *National Practice Model* appropriately and proportionately
- Through the Data Sharing Partnerships, CPPs endorsing a common approach to the sharing of information, using the *Well-being Indicators*, where concerns about an individual child exist
- Embedding the use of the National Practice Model in all training.

New roles

⁴¹ MacNeil, M. and Stradling, B. (2010) Evaluation Briefing 6, *Greenshoots of Progress*, Edinburgh, The Scottish Government, p. 14.

⁴² Details of the *National Practice Model* can be found in The Scottish Government (2008) op.cit.,pp.22-30 and papers on the *Getting it right for every child* website (www.scotland.gov.uk/gettingitright).

⁴³ See practice paper on using *the National Practice Model* (in preparation) on *Getting it right for every child* website (www.scotland.gov.uk/gettingitright)

The Named Person⁴⁴

Building on the recommendation from *For Scotland's Children*,⁴⁵ and *Protecting Children: Framework for Standards*,⁴⁶ we are supporting the concept of a *Named Person* in health or education, depending on the age of the child, to act as the first point of contact for children and families. Through children and families knowing who to contact, their access to help is made easier. This is an essential feature of a child centred approach.

It will be the *Named Person's* role to take initial action if a child needs extra help, formalising the activities universal agencies are undertaking routinely in their day-to-day work. The difference is that the *Named Person* will use the *National Practice Model* to help decide what actions to take and work more efficiently with others. Experience from the pathfinders and learning partners has shown that, in spite of anxieties, the role of the *Named Person* has not created additional work. Rather, the new processes have sharpened existing roles.

The *Named Person* is critical for working with children, young people of any age and their families and supporting early intervention. Strategic managers within health and education need to give special attention to appointing a *Named Person* for specific groups of children, such as those who are being home educated, are from travelling families, or are young people who are not in secondary education, whether or not they are the subjects of compulsory measures. This might be someone from a youth service or the voluntary and private sector.

What makes a difference:

- Developing the role of the *Named Person* to strengthen the child centred approach
- Strategic managers deciding who the *Named Persons* will be in their organisational structures in health and education
- Developing a protocol that defines at what stage Named Person responsibility is handed over from health to education
- Ensuring the Named Person is appropriately inducted into the role
- Putting in place mechanisms for appointing a *Named Person* if children are being home educated, are from travelling families or are young people not in secondary education
- Agreeing how to advise children and families who the Named Person will be and what can be expected from them and make that information accessible to members of the public.⁴⁷

⁴⁴ See Practice note on *Named Person* on *Getting it right for every child* (in preparation) on *Getting it right for every child* website (www.scotland.gov.uk/gettingitright)

⁴⁵ Scottish Executive (2001) *op.cit.* p.90

⁴⁶ Scottish Executive (2004) *Protecting Children: Framework for Standards*, Edinburgh, Scottish Executive

⁴⁷ See *Getting it right for every child* practice note on *Getting it right for every child* website (in preparation) and Stradling *et al.* (2009a) *op.cit*

The Lead Professional⁴⁸

Where a child needs help from two or more agencies, the *Lead Professional* is the person who co-ordinates multi-agency planning and makes sure that the different services provide a network of support around the child in a seamless, timely and proportionate way. They have a critical role in ensuring children and families are active contributors. Families have reported that this role has helped them understand what is happening, and has made them feel part of a team that works together.⁴⁹

What makes a difference:

- Lead professionals making sure children and families are active contributors to the assessment and planning process
- Strategic managers agreeing collectively the role of the *Lead Professional* and in what circumstances it will be used. This will include the voluntary and private sectors
- Each agency deciding who in their agency is appropriate for the role of Lead Professional
- Deciding and setting up mechanisms for individuals to become *Lead Professionals*
- Making sure it is clear to everyone when and how *Lead Professionals* begin and end their role.

New procedures

It is critical to support *Getting it right for every child* practice with robust procedures so that practitioners know what to do and when to do it. There also need to be high quality processes to engage children and families. This applies across all agencies and may be single or inter-agency but, whatever the context, the procedures and processes need to demonstrate to practitioners how they fit into the *Getting it right for every child* approach.

Procedures should be designed to model the *Getting it right for every child* Core Components, focusing on improving outcomes, streamlining processes, creating consistent, high standards of co-operation, joint working and communication where more than one agency needs to be involved.

Agencies may wish to review and revise all their relevant procedures but should pay particular attention to the following:

- Information sharing and consent
- Single and inter-agency child protection guidelines
- Conflict resolution
- Recording.

⁴⁸ See The Scottish Government (2008) *op.cit*. Also *Getting it right for every child* practice note on the *Lead Professional* (in preparation)

⁴⁹ Stradling, R. and MacNeil, M. (2009) Evaluation Briefing No. 1 *Lead Professionals and Named Persons*, Edinburgh, The Scottish Government, p.9

These areas are particularly important on the journey of change and reflect the concerns and misunderstanding practitioners have voiced in implementation.

What makes a difference

- Strategic managers reviewing all procedures affecting children and families, including those used in adult services, to ensure consistency and compatibility with the *Getting it right for every child* approach
- Supporting practice with systems to ensure staff understand and know how to use procedures and where to seek advice and clarification.

Support for changing practice

This will involve support from several directions: from strategic managers, senior and operational managers, peer support from practitioners within and across agencies, and from consultation with children and families. The commitment of managers at all levels to create opportunities and provide resources that support practitioners through the change process is fundamental. This is particularly helpful in giving them confidence to change their ways, especially when other policies appear to be creating competing demands.

Support to develop practitioner skills can come in the form of continuing professional development, materials and learning, in-house training, mentoring, supervision, practitioner forums, learning sets and access to learning materials. Local needs will shape the support required.

Bolting on a *Getting it right for every child* approach to what is already being done has not worked and has been found to impede the change process. One way round this is to use staff who have been involved in trialling changes to act as champions and mentor or train others, as this example from the Highland pathfinder shows.

Champions leading transitions from old to new ways

The staff who had been involved in the trialling of new procedures and tools claimed ownership of them and played an important part in encouraging their colleagues to make the transition from the old systems and practices to the new ones... Their impact as a catalyst has in part been because they address the concerns of colleagues by focusing on what they do and how they do it in addition to the rationale behind the practice pathways selected for developed and testing.⁵⁰

As with changing culture and systems, training has been found to be critical in helping staff change their practice and feel competent and confident to move forward. Staff need time to complete and assimilate the training if it is to be effective in changing practice. Partnerships with higher educational

⁵⁰ Stradling et al. (2009a) op.cit p.75

establishments help to ensure students at pre-qualifying, qualifying and post qualifying levels are taught about *Getting it right for every child* so that new staff are already familiar with the approach when they come into post.

Lanarkshire has underscored the need for support to staff in different ways. They have found that all staff need to work together to improve well-being and outcomes for children. Helping children and families to understand what implementing *Getting it right for every child* means for them and actively seeking their feedback has been part of implementation. Dedicating time to fully understand the practical details of the *National Practice Model* has also been essential. Lanarkshire believes all practitioners should invest time to explain their roles and functions to others and understand the roles of colleagues in helping children and young people. Above all, practitioners should know where their own responsibilities begin and end.

What makes a difference:

- Managers adopting a strategy that shows they are clear about what is expected of staff and that they will respond to concerns staff have about the changes
- Managers finding ways to help staff become confident that changes will improve how they work
- Putting in place support mechanisms that help staff to let go of the old ways and replace them with the new ways of working
- Encouraging practitioners to identify the gaps in their knowledge and skills with opportunities provided to address the gaps
- Involving in the training of practitioners, specialist professionals from specific areas, such as child protection, health, educational and disability and those working with looked after children
- Giving staff time as part of their normal day-to-day activities to undertake and assimilate training. This will include building into commissioning contracts time for voluntary and private sector staff to have time and resources for appropriate training
- Building training time into plans for changing practice.

Comprehensive practice guidance on implementing *Getting it right for* every child

The pathfinders and learning partners have found it helpful to develop comprehensive practice guidance to be used in both a single and inter-agency context. There are examples on the *Getting it right for every child* learning community.⁵¹ The comprehensive guide should build on good practice which has been assimilated into a *Getting it right for every child* way of working. It

⁵¹ See *Getting it right for every child* Learning Community <u>http://www.scotland.gov.uk/Topics/People/Young-</u>

People/childrensservices/girfec/Practitioners/LearningCommunity

will refer to any relevant government guidance relating to children. Experience has found the following content to be useful:

- *Getting it right for every child* Values and Principles and the Core Components
- Engaging children and families
- An explanation of how to use the *National Practice Model* in assessing and planning for children
- Roles and responsibilities of practitioners and agencies
- Information sharing between agencies
- Inter-agency procedures and practices, including the voluntary and private sector sectors
- Links to single agency guidance.

Producing single agency guidance as well as inter-agency guidance will also help support practitioners to understand their local agency specific practices and see how any statutory requirements in the single agency can fit with *Getting it right for every child*. This includes local single agency practice in relation to health (Hall4), education (additional support needs), looked after children, the children's hearing system, and the use of the Scottish Women's Handheld Maternal Health Record (SWHMHR).

What makes a difference:

- Agencies commissioning comprehensive practice guidance for single and inter-agency use
- Comprehensive guidance building on local good practice that has been assimilated into *Getting it right for every child*
- Sharing experience across local authorities of what makes for helpful content, e.g. through the *Getting it right for every child* learning community
- Producing single agency practice guidance helps practitioners understand how *Getting it right for every child* relates to the policies in other agencies.

Appendices & References

Changing systems

Changing practice

Implementing change

Changing culture

Appendix 1

A time line for *Getting it right for every child* from the Highland pathfinder⁵²

Timeline for *Getting it right for every child* in the Highland pathfinder

2004

• **February 04:** Well-being Indicators (SHANARI) developed at Children's Plan workshop in Highland.

2005

- **April 05:** Work on the IAF begins by a multi-agency reference group supported by Jane Aldgate & Wendy Rose of the Open University.
- **August 05:** Discussion starts around the possibility of Highland acting as a pathfinder for *Getting it right for every child*.
- October 05: The pathfinder programme initially agreed between Highland and Scottish Executive.

2006

- **March 06:** work begins on putting together a multi-agency development team in Highland including representatives from social work, health, education, culture and sport, police, and SCRA.
- June 06: The Government announces the Pathfinder programme.

2007

- Jan 07: Draft guidance and a draft version of the new PHNCFR for public health nurses is completed. A group of health visitors and school nurses start trialling the use of the My World Triangle and the Wellbeing Indicators. The language of *Getting it right* begins to be introduced into the records and plans being developed in other agencies working with children and families. Piloting of the new PHNCFR begins.
- **April 07:**NHS Highland-wide learning sets start informing and promoting GIRFEC implementation across midwifery/public health nursing practice.
- **April 07**: Highland Child Protection Committee agrees to use a risk assessment framework that fits with GIRFEC processes.
- **May 07:** Piloting of the Child's Plan meeting begins in the pathfinder area. This incorporates a solution-focused approach even where there is a statutory requirement. Families begin to report feeling more involved in assessment and planning. Practitioners using the *Getting it right* Practice Model report improvements in engagement with families through using the process. They also report that the reduction in time

⁵² Stradling *et al.* (2009) *op.cit.* p.156-7

spent at meetings is beginning to mean that more time can be spent doing direct work with children and their families.

- June 07: Following a trial period, a new Police Child's Concern Form is introduced in the pathfinder area. Early indications are that this brings about a reduction in non-offence referrals to the Children's Reporter. Practitioners in health and education begin to see how getting information quickly through the Child Concern Form helps them intervene to support children at the time of crisis. As a result, early plans begin to be created in universal services where referral to social work would previously have been the response.
- June 07: Formal training for managers begins (Programme 1) and the new processes begin to be more widely understood and used. Education begins to articulate the links between GIRFEC, Curriculum for Excellence and the Additional Support for Learning Act (2004).
- **Sept 07:** International conference is held at Aviemore to launch the baseline report on delivering integrated children's services in Highland.
- **Nov 07:** The Highland Council restructures. Some posts redesigned to support GIRFEC implementation. Service Managers Groups created to support the roll out process. Appointment of Inter-agency Nurse Consultant. Work begins on addressing how specialist and acute health services can support and work within the GIRFEC processes.
- **Dec 07:** Lead Professional training programme is developed and tested.

2008

- Jan 08: The new Practice Model, processes and procedures are implemented across the whole pathfinder area. Multi-agency training for Lead Professionals starts with 2-day workshops held for ASGs.
- March 08: Multi-agency guidance is circulated for consultation.
- March 08: The new PHNCFR is rolled out across the whole of Highland.
- May 08: Consultation with the Children's Panel begins.
- **May 08:** Recruitment of Voluntary Sector Lead into the development team.
- **June 08:** Child Protection training combines GIRFEC processes and assessment framework through integrated training strategy and begins to help practitioners consolidate that GIRFEC is day to day practice and not a separate way of meeting children's needs.
- **Aug 08:** Service Managers realign early intervention posts and funding so that help is more easily accessible and equal for all children.
- **Sept 08:** A series of consultation events with practitioners on the guidance gathers information on practice improvement and positive impact on children and their families. Greater equity, equality and reduction in duplication and time spent writing reports is reflected.
- **Sept 08:** Midwife Consultant (*Getting it right for every child*) is seconded to the development team.
- **Nov 08:** It is agreed that the Child's Plan will be used as a report to the Children's Hearing.

• **Dec 08:** The process of using the Child's Plan as report to the Children's Hearing begins.

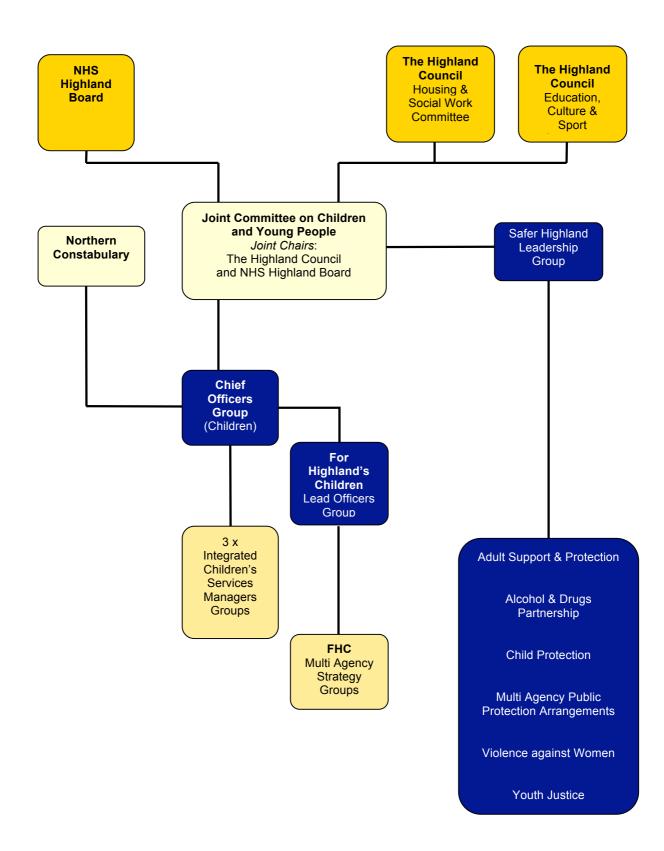
2009

- **Feb 09:**ECS guidance is completed. Staff now using GIRFEC documentation as part of staged approach to produce plans.
- **March 09:** training programme for roll-out of GIRFEC across Highland is implemented.
- **June 09**: New Child Protection procedures incorporating GIRFEC at final draft and ready for launch in June.

Appendix 2

An example of governance structures from Highland

The following diagram illustrates the strategic and operational governance structure for integrated children's services in Highland



References

i) Getting it right for every child related publications

General

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http://www.forhighlandschildren.org/htm/girfec/gir-publications/getting-it-right-pathfinderguidance-v1-mar08-consultation.pdf

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Evaluation reports and themed briefings

Evaluation reports

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Evaluation themed briefings

http://www.scotland.gov.uk/Topics/People/YoungPeople/childrensservices/girf ec/publications/EvaluationBriefings

Briefing 1:	5 5 11	Available on web
	facing any service or agency which is preparing staff to take on these roles.	Jan 2010

Briefing 2: <u>The Impact on</u> <u>Services and</u> <u>Agencies Part 1</u>	Focuses on how gearing up for Getting it right for every child has impacted on children's services in Highland and the systemic and structural changes that were introduced to support the implementation process. This also includes governance and strategic planning.	Available on web Jan 2010
Briefing 3: <u>Record Keeping and</u> <u>Assessment of</u> <u>Children's Needs</u>	Focuses on how the Getting it right practice model was implemented in the Highland pathfinder, the impact this has had on professional practice across children's services and the challenges that still need to be addressed to ensure the model is fully embedded.	Available on web Jan 2010
Briefing 4: Implementing Getting it right for every child through a single trigger: Domestic Abuse	Focuses on how four pathfinder areas approached the task of providing support for children and young people who experience domestic abuse in the family home: the development work, the implementation strategies, the impact on joint working, the emerging outcomes for victims and their families.	Available on web Jan 2010
Briefing 5: <u>Outcomes for</u> <u>Children and Young</u> <u>People</u>	Focuses on the impact that the Getting it right approach has had in improving children's well-being and in improving their experience of children's services.	Available on web March 2010
Briefing 6: <u>Greenshoots of</u> <u>Progress</u>	Focuses on how, less than two years after the pathfinder was initiated, the <i>Getting it</i> <i>right</i> approach is working and that professionals across the children's services and other agencies working with families, are beginning to embed the new processes in their day-to-day practice.	Available on web April 2010
Briefing 7: Quality Assurance and Monitoring	Looks at the role that quality assurance, self evaluation and monitoring can play in supporting the implementation of Getting it right for every child.	In preparation
Briefing 8: <u>The Impact on</u> <u>Services and</u> <u>Agencies Part 2</u>	Focuses on the extent to which the changes in practice and systems brought about by the implementation of Getting it right have made savings in terms of the workloads of key staff, numbers of meetings held, etc.	Available on web May 2010

Briefing 9: Engaging with Getting it right	Reviews the appropriateness and effectiveness of the communication strategies deployed in support of the implementation process and on the effectiveness of the strategies used to consult with service users and to engage with individual children and their families in the assessment, planning and review processes.	In preparation
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ii) Relevant Scottish Government policy documents

Achieving Our Potential: A Framework to tackle poverty and income inequality in Scotland http://www.scotland.gov.uk/Publications/2008/11/20103815/0

Concordat between the Scottish Government and local government, The Scottish Government and Convention of Scottish Local Authorities (COSLA) (2007)

http://www.scotland.gov.uk/Publications/2007/11/13092240/concordat

Curriculum for Excellence: (introduction to review of Scottish curriculum from age 3-18) http://www.scotland.gov.uk/Topics/Education/Schools/curriculum

Curriculum for Excellence: components http://www.ltscotland.org.uk/curriculumforexcellence/

Curriculum for Excellence: an overview <u>http://www.ltscotland.org.uk/curriculumforexcellence/curriculumoverview/index</u> .asp

Delivering a Healthy Future: An Action Framework for Children and Young People's Health in Scotland http://www.scotland.gov.uk/Publications/2007/02/14154246/0

Draft National Strategy for The Development of The Social Service Workforce in Scotland 2005 - 2010: A Plan For Action http://www.scotland.gov.uk/Publications/2004/12/20418/48839

Early Years Framework http://www.scotland.gov.uk/Publications/2009/01/13095148/0

Equally Well: Report of the Ministerial Task Force on Health Inequalities http://www.scotland.gov.uk/Publications/2008/06/25104032/0 Equally Well http://www.scotland.gov.uk/Topics/Health/health/Inequalities/inequalitiestaskforce

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Moving Forward in Kinship and Foster Care: Report from the 'Getting it right for every child in kinship and foster care' reference group http://www.scotland.gov.uk/Publications/2009/02/27085637/0

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