

## South Ayrshire Council

# Getting it right for every child – Team with the Family Guidance for the named person and lead professional.

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With thanks to:



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# Team with the Family – The single planning process supporting the child and young person’s plan (My Plan)

## 1. Introduction

This guidance is suitable for all named persons, lead professionals and partners, regardless of the agency they are based in. The Team with the Family is the operational embodiment of the Single Planning Process supporting the child and young person’s plan (*‘My Plan’*) in South Ayrshire for children from birth (where the named person is usually the Health Visitor) until 18 years of age (and over if they remain in school). As such it is a key delivery mechanism for GIRFEC.

This document has been refreshed in line with the GIRFEC Refresh in 2022 with thanks to East Ayrshire Council from whom this document was adapted.

This Guidance should be read in conjunction with the Pan-Ayrshire GIRFEC Child & Young Person’s Pathway and Practitioner Guide which can be found on the GIRFEC website <https://www.girfec-ayrshire.co.uk>

## 2. Child Protection Concerns

Child Protection procedures remain unchanged. Services will continue to provide an immediate response and contact South Ayrshire Initial Response Team on 01292 267675 to investigate concerns for those children and young people who may be at risk of significant harm.

***If you have a child protection concern, follow South Ayrshire’s child protection procedures.***

## 3. Wellbeing

The Children and Young People (Scotland) Act 2014 is about improving the wellbeing of children in Scotland. Ensuring everyone - children, families and the services that support them – have a common understanding of what wellbeing means.

It is described in Part 18 of the Act in terms of eight indicators:

- **Safe** – protected from abuse, neglect or harm at home, at school and in the community.
- **Healthy** – having the highest attainable standards of physical and mental health, access to suitable healthcare and support in learning to make healthy, safe choices.
- **Achieving** – being supported and guided in learning and in the development of skills confidence and self-esteem, at home, in school and in the community.
- **Nurtured** - having a nurturing place to live in a family setting, with additional help if needed or, where possible, in a suitable care setting.

- **Active** – having opportunities to take part in activities such as play, recreation and sport, which contribute to healthy growth and development, at home in school and in the community.
- **Respected** – having the opportunity, along with carers, to be heard and involved in decisions that affect them.
- **Responsible** – having opportunities and encouragement to play active and responsible roles at home, in school and in the community, and where necessary, having appropriate guidance and supervision and being involved in decisions that affect them.
- **Included** – having help to overcome social, educational, physical and economic inequalities and being accepted as part of the community in which they live and learn.

If there is a wellbeing concern practitioners use the National GIRFEC Practice Model and ask five key questions:

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

Where a wellbeing need has been identified and passed to the named person (with the consent of parents/carers and children over 12 years) the named person must record the need within their system, discuss with the child/young person, parents/carers and any appropriate professionals or other family members, ask the five key questions and take appropriate action to construct a child and young person's plan to improve their wellbeing.

A named person will only offer advice or support in response to a request from the child/young person or parent/carer or when a wellbeing need is identified. They can help them address their concerns early and in some cases avoid bigger challenges developing.

#### 4. Information Sharing and Communication

Practitioners who identify a wellbeing need share appropriate information with the child/young person's named person with the consent of the parent/carer and young person (over 12 years). This does not mean that every piece of information held about a child and their family has to be passed on to the named person but that **relevant and necessary** information in relation to the wellbeing need is shared.

In seeking informed consent it is important that the child/young person and family are made aware of the information being shared, with whom and for what reason. If consent is withheld the named person must record their justification for sharing or not sharing in their system e.g. SEEMiS Pastoral Notes or Care Partner including reasons and detail of the area of wellbeing to be improved. Further information is contained within the Information Sharing Chapter of the GIRFEC in Ayrshire Practitioners Guidance which can be found on the GIRFEC website.

It is important that at every stage the Team with the Family communicate collectively and with the named person.

## 5. The Child and Young Person's Plan (*'My Plan'*)

The Child's Assessment and Plan is now known in South Ayrshire as '*My Plan*'. **'My Plan' should be headed up with the child's name i.e. Jack's Plan or Jack Smith's Plan.**

A child and young person's plan is a tool to help services, such as Education, Health, Social Work and Voluntary Sector services, co-ordinate a range of additional help offered to a child/young person to improve wellbeing outcomes. The plan must be considered and developed in partnership with the child/young person, their parents/carers and the services involved.

It brings together current planning processes used for children/young people, including children/young people with additional support needs or child protection arrangements, to ensure plans are co-ordinated and tailored to meet the specific needs and circumstances of individual children/young people.

If a wellbeing assessment has been undertaken and wellbeing needs of the child/young person are identified, a plan is required to measure improved outcomes for the child/young person.

## 6. The named person

Named persons have a key role in GIRFEC delivery and the Single Planning Process. In South Ayrshire we have agreed that the role of named person will be undertaken by the following:-

- Birth to Primary 1 entry – Health Visitor or Family Nurse (until 2 years)
- Primary 1 entry to Secondary entry – Head Teacher or Deputy Head Teacher
- Secondary 1 to S6 – Principal Teacher Guidance/Pupil Support
- 16 to 18 year olds who have left school – Previous PT Guidance/Pupil Support
- Home Schooled children – Inclusion Co-ordinator
- Gypsy Traveller children – Inclusion Co-ordinator
- Outwith Authority/Specialist Placements – Named person of establishment

Named persons promote, support and safeguard the wellbeing of children.

## 7. The lead professional

The lead professional is the person who works alongside the named person and coordinates the child's/young person's plan arranging Team with the Family reviews to support the child/young person and their family in a timely and proportionate way.

They ensure the child's/young person's plan is managed properly and co-ordinate the support within the plan. Where the child is on the Child Protection register or is currently experiencing care the lead professional is the child's social worker.

The lead professional will be a practitioner who is chosen because they have the right skill and experience to ensure the child/young person's plan is managed properly and who can work with the child/young person, family, named person and other services supporting the child/young person. **Any agency can assume the lead professional role.** In determining the most appropriate lead professional the child/young person's predominant needs should

be considered. The views of the child/young person and family require to be considered. A young person should be asked who they would like their lead professional to be and have that accommodated where at all possible.

Full agreed roles and responsibilities of named persons and lead professionals in Ayrshire are documented in the GIRFEC in Ayrshire Practitioner Guide. This can be found on the Pan-Ayrshire GIRFEC website.

## 8. Team with the Family

Team with the Family is a proportionate approach to meet the needs of the child/young person and is facilitated by the named person and lead professional (if there is one) from early support stages up to Child Protection.

***The circumstances of the child/young person should be taken into account and the meeting called Team with 'young person's name' rather than Family i.e. Team with Jack Smith (should this be more appropriate). The child or young person should be consulted and their views respected.***

Engagement with the child/young person and family is an extremely important part of the GIRFEC process at every level. Parents/carers and children/young people need to be prepared for a Team with the Family meeting and their views sought. Therefore it is good practice for the named person or lead professional to contact the family well in advance of any Team with the Family meeting and explain the purpose of the meeting, who is to attend and what is to be discussed. They should be asked for their wishes on where and how the meeting is to be held and how they would like to give their information and when they would like to do that. They may like the meeting to be in person, or may feel that an online meeting is better for them. The Team with the Family should do their best to ensure that the wishes of the child/young person and family are accommodated.

It is important that attendees feel comfortable, please refer to the '*Chairing a Team with the Family Meeting Guidance 2024*' for further tips on how to create a comfortable environment, and promote positive, solution focused language.

When seeking the views of the child/young person and parents/carers it is recommended that the named person/lead professional or a partner to the child/young person's plan delegated by them, gain their views using various tools such as the Starting A Conversation (Wellbeing Web Tool), and advocacy services. This should be done in advance of the meeting and will give the family an overview of the wellbeing indicators to be discussed at the meeting and allow them to share their own views. The focus and purpose of the Team with the Family meeting and wellbeing need should be clear and understood by those in attendance, including the child/young person and parent/carers as should the outcome of the meeting including any additional identified support.

In terms of the Child's Pathway, the multi-agency Team with the Family meeting may take place where additional support is provided within universal services and will always take place when there is specialist support from a multi-agency team and enhanced multi-agency support to overcome adversity and risk. The Team with the Family will agree supports and monitor outcomes. The named person or lead professional (if already determined) will invite the child/young person, parents/carers and other relevant family members and services to attend. An important task for the first multi-agency Team with the Family meeting is to agree a **lead professional** who will work with others involved with the child/young person and their

family to construct (on their system), co-ordinate, review and communicate with all partners involved the child/young person's plan that will emerge.

The views of the child/young person and parent(s)/carer(s) on who they would like their lead professional to be should be taken into account. It is important to note that there will only be one child/young person's plan. This does not exclude other specialist assessments taking place, or if there is a Coordinated Support Plan in place, but they must be incorporated into the child/young person's plan. The agreed plan is uploaded to AYRshare and shared with the members of the Team with the Family who will have a role in meeting the child/young person's planned outcomes. The plan will be reviewed by the Team with the Family as appropriate. A minute of the meeting will be recorded using the action plan part of the child/young person's plan. A note of any disagreement/part of a discussion can be taken if required.

All significant events for an Integrated Chronology should be recorded on AYRshare and a copy of the Integrated Chronology should be discussed at the Team with the Family meeting. The named person/lead professional should discuss the chronology with the child/young person and family regularly and in advance of any Team with the Family meeting.

Each Team with the Family meeting should consider if the child or young person supports, or helps to support, someone else (a relative or friend). This could be as a result of an illness, disability or mental health condition. They might support this person because they are elderly, neurodiverse, have challenges with drugs or alcohol (including in recovery), or because they need help to communicate (including translating, signing and literacy). The person they are supporting can be older or younger than the child or young person. If they do, regardless of the amount of hours they spend doing so, they are a Young Carer. This entitles the child or young person to access additional support and this should be discussed with the family at the meeting.

### **8.1. Team with the Family - Additional support within universal services**

Once a wellbeing need has been identified an initial discussion will take place with the child/young person and parents/carers. This will be recorded in the named person's system (SEEMiS Pastoral Notes/Care First). In particular this should note the agreed actions to support the child/young person.

If a wellbeing need has been identified that cannot be met within your own establishment/service the named person will contact the appropriate service/agency to discuss what universally available support may be put in place to meet the identified wellbeing need. This support may come from within Education i.e. direct involvement of Educational Psychologist, ASD outreach or it may be from Health i.e. Speech and Language Therapy etc.

Once the named person discusses and agrees the proposed support with the service they will use the service guidance to complete the Request For Assistance form and send it to the service/agency. General contact details will be available on the GIRFEC website and in the service guidance. The service will respond to the named person within 10 working days by completing the second page of the form and the referrer will then upload it to AYRshare with the individual as a contact e.g. school nurse.

Actions taken by the named person should be recorded in SEEMiS Pastoral Notes or Care Partner.



The plan requires to be reviewed before moving to the next stage.

## **8.2. Team with the Family – Specialist help from a multi-agency team**

A “*My Plan*” will be completed. Informed consent must be sought from the parent/carer and young person (12 years and over) to share information with appropriate services. Some services may request a copy of the “*My Plan*” document with the Request For Assistance.

It is important to note at this stage that the Team with the Family Single Planning Process is designed to be integrated and inclusive. Where appropriate the named person will request assistance and the named person or lead professional can contact any agency from the statutory or voluntary sectors and make a reasonable request for attendance at a Team with the Family meeting, as potential partners to a child/young person’s plan regardless of whether or not that agency has prior knowledge of the child, young person or family.

## **8.3. Team with the Family – Enhanced multi-agency support to overcome adversity and risk**

Where the Team with the Family considers the child/young person requires compulsory measures of care a referral should be made to the Children’s Reporter from the Team with the Family by the named person or lead professional. Social Work should be included in the Team with the Family meeting when this is being considered. However it should be noted that although good practice for the decision to come from the meeting, any practitioner can refer to the Children’s Reporter at any time if it is considered that the child requires compulsory measures of care. Where a child/young person is subject to a Compulsory Supervision Order (CSO), educational targets should be clearly identified in the child/ young person’s plan.

If the child is under statutory intervention, current Child Protection and Looked After processes are followed. This includes Child Protection Planning Meetings and Looked After reviews, known in South Ayrshire as ‘*My Meeting*’. No other Team with the Family meetings should take place. If the child/young person is not subject to statutory measures of care the lead professional, in conjunction with the named person, should co-ordinate the Team with the Family.

## **8.4. Reviewing the Team with the Family meeting**

After the Team with the Family meeting has taken place, and in advance of any review date set, it is good practice to maintain contact with the child/young person and their family to monitor the progress of planned outcomes. This will ensure that the child/young person and their family are partners to their own plan which will make achieving improved outcomes much more likely. The child/young person and parents/carers should have actions within the plan that they are supported to carry out to improve wellbeing outcomes.

**If a partner agency is considering ending their involvement, a review meeting should be held particularly if they are providing the lead professional role.** The review Team with the Family meeting should consider the implications for the child/young person’s plan of any agency ceasing to be a partner to the plan and review the plan accordingly. It is important for a child/young person and their family to be aware of who their new lead professional is (if required) or whether the named person is to resume the main responsibility for the child/young person’s plan. The plan must be reviewed a minimum of annually. The needs of a child/young person will generally dictate that meetings will be called as and when required.

## 8.5. Who should attend a Team with the Family meeting

The purpose of the multi-agency Team with the Family meeting is to establish or review a child/young person's plan with the child/young person at the centre of that planning process. It is very important that the child/young person are supported to attend and have a say in where and how the meeting is held and when and how they present their views. All partners to the child/young person's plan attend the Team with the Family meeting. Only those who are directly involved in providing support to the child/young person and their family should be in attendance or those who the named person or lead professional is of the opinion can enhance the Team with the Family support. This is specifically intended to make the process as meaningful as possible for the child/young person and their family.

Please note that it is appropriate to convene a Team with the Family meeting to discuss wellbeing concerns even if a child/young person or parent/carer declines to attend. Every support should be offered to facilitate their attendance however if it is not possible for them to do so the parent/carer and/or young person (over 12 years old) requires to give consent for the meeting to go ahead in their absence and should be given the opportunity to provide their views. (This does not include Child Protection Planning Meetings/reviews). The named person/lead professional can then discuss the outcome of the meeting to the child/young person and their family, share the child/young person's plan with them and gain their views on the outcome.

Please refer to *Chairing a Team with the Family Meeting Guidance 2024*.

This guidance is intended to assist:

- Named persons and lead professionals who are new to chairing Team with the Family meetings
- Those expecting to take on the role of named person or lead professional in the near future
- Professionals already experienced in leading meetings who want to brush up on their chairing skills and practices.

This guidance should allow you to:

- Explain the function and purpose of Team with the Family meetings
- Understand the role and responsibility of the chairperson
- Communicate and engage effectively with everyone involved in meetings
- Structure and conduct solution focused meetings
- Use a range of tools to get the most out of a meeting
- Apply a range of strategies for handling different behaviours in meetings.

## Glossary of Terms

**Child/Young Person's Plan (My Plan)** – The child/young person's plan specifies the desired outcomes derived from any assessments including those within the National Practice Model and the actions necessary to enhance and support a child/young person's wellbeing. 'My' should be substituted with the child/young person's name.

**Child Protection** - This refers to the activity that is undertaken to protect specific children who are experiencing, or are likely to experience, significant harm.

**Getting it right for every child (GIRFEC)** - This Scottish Government approach makes sure that all Scotland's children, young people, and their families have consistent, co-ordinated support to ensure a bright future for every child.

**Lead professional** – The practitioner who is the most relevant to co-ordinate the professional network to support the needs of the child. They co-ordinate and arrange the review of the child/young person's plan working collaboratively with the child's named person and the family.

**Looked After Children** – Children and Young people who are in the care of the Council (the corporate parent). Looked after children may live in their regular place of residence (looked after at home) or be looked after away from home according to circumstances.

**Named person** - The named person is a Health Visitor or Family Nurse (up to 2yrs) for children who have not started Primary School and an identified person within Education for children from entry into primary 1 until the age of 18 or over if still in school. Their function is to promote, support and safeguard the wellbeing of the child.

**Request For Assistance (RFA)** – An agreed format to request help from those who can provide support for a child/young person and their family. Assistance can be requested by the named person or lead professional to all partners.

**Targeted supports** - Services which are designed to help specific children for particular needs e.g. social work, some voluntary sector services, some CAMHS services.

**Team with the Family** – Single planning process supporting the child/young person's plan (My Plan). Team with the Family is a proportionate approach to meet the needs of the child/young person and is facilitated by the named person and lead professional (if there is one) from early support stages up to Child Protection planning meetings.

If the young person requests it, 'the family' should be substituted with the young person's name i.e. Team with Jack Smith.

**Universal Services** - Services which will be accessed by all children throughout their childhood i.e. Health and Education provisions.

**Wellbeing Outcomes** – The national wellbeing outcomes for children. Safe, Healthy, Nurtured, Achieving, Respected, Responsible, Included (SHANARRI).

**Young Carer** – a young carer is a child or young person under the age of 18 (or 18 and in full time education) who is supporting, or helping to support, a relative or friend. They do not need to be the primary carer and there is no minimum caring requirement. Young carers can look after more than one person and can also have their own health issues. Young carers can provide practical or emotional support, physical care, personal care, help with communication (translation, signing, literacy etc.), manage household finances, manage medication and prescriptions, or look after brothers or sisters.