

getting
it right

Getting it right for every child
and child and young people's mental health

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Health and Social Care
Scottish Government

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Getting it right approach

- Pre- birth \Rightarrow 18 \Rightarrow 25 (+?)
- Personalised approach for **all** children and young people
- UNCRC foundation
- Based on improving well-being
- Outcome focused
- Child/person at centre
- Applies to all working with children – and adults who are parents or carers

Core components

- Focus on improving outcomes
- Integral role for children, young people and families
- Making the most of universal services
- A common approach to gaining consent and to sharing information where appropriate
- A coordinated and unified approach to identifying concerns, actions and outcomes
- Streamlined planning processes that lead to efficient provision for children
- A confident and competent workforce
- A lead professional to co-ordinate where necessary
- The capacity to share demographic, assessment, planning and outcome information

Key elements

- Named person
- Lead professional
- Child centred approach (engagement of families)
- National practice model including well-being and resilience
- Standardised, shared, assessment
- Strengthen universal services

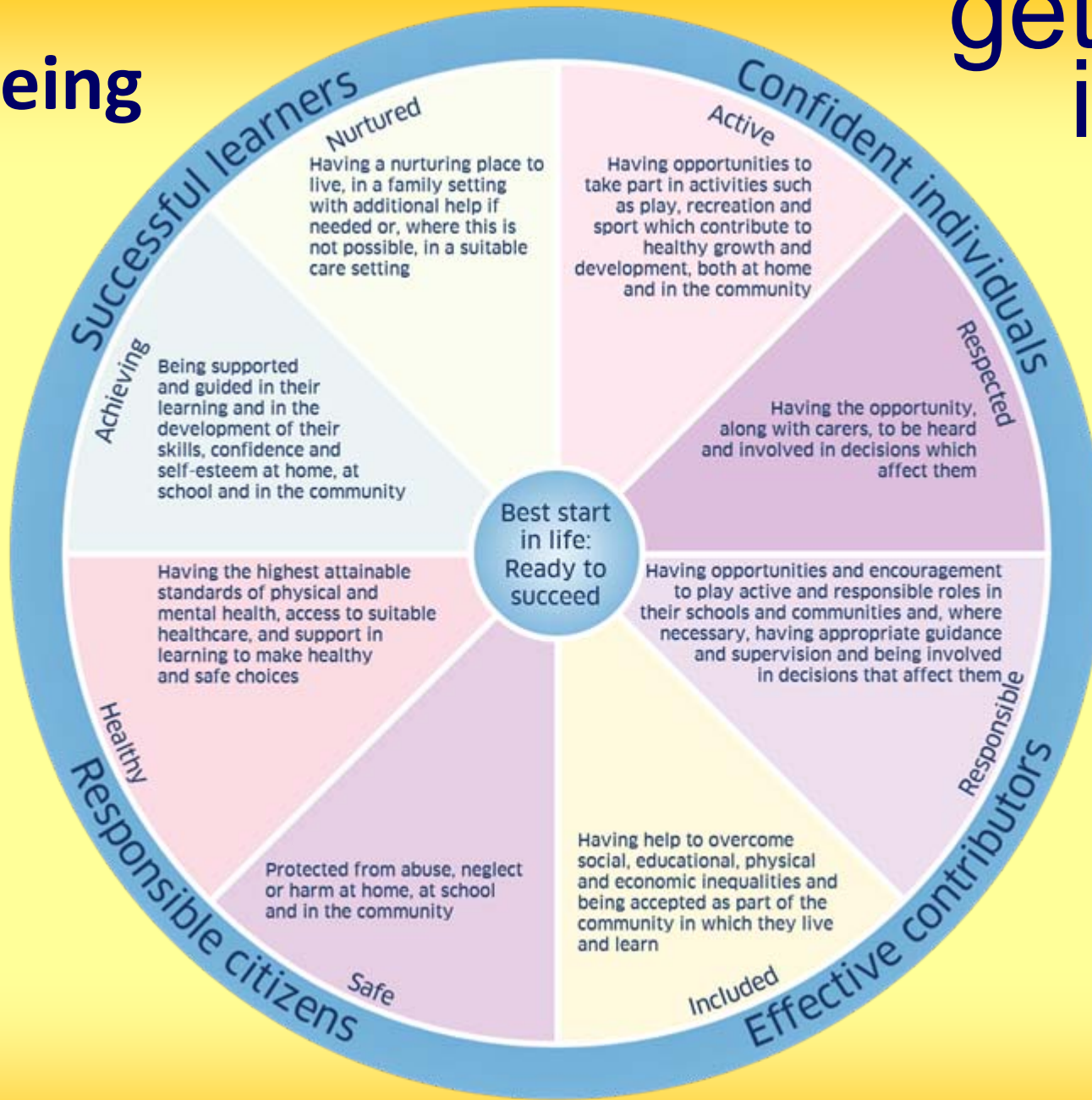
Five questions

Practitioners need to ask themselves:

1. What is getting in the way of this child or young person's well-being?
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 now to help this child or young person?
5. What additional help, if any, may be needed from others?

Well-being

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Well-being in more detail

| SAFE The child or young person is: | HEALTHY The child or young person is: | ACHIEVING The child or young person is: | NURTURED The child or young person: | ACTIVE The child or person is: |
|--|--|--|---|--|
| Living in a home environment which is free of abuse and violence. | Healthy at birth, sustains good physical health and, where relevant, manages chronic conditions/disabilities. | Developing self care and life skills appropriate to age and stage. | Experiences love, emotional warmth and attachment | Encouraged to physically active capacities perm |
| Cared for by parents or carers and has at least one adult they can always turn to for love and support. | Positive about self and confident and competent when faced by problems and adverse circumstances. | Developing a level of independence or autonomy appropriate to age and stage. | Has someone they can turn to, trust and rely on when anxious or disturbed. | Encouraged to opportunities fo recreation and |
| Living in a family or extended social network which is free of sexual exploitation. | Respectful of self and others; Able to make choices that are safe and appropriate and Able to talk about one's feelings (incl. sexuality) in age-appropriate ways. | Developing communication skills appropriate to age or stage. | Receives praise, encouragement, attentiveness and cognitive stimulus | Receiving appr stimulus and encouragement their interests. |
| Protected from avoidable physical dangers and health hazards within the home. | Leading a healthy lifestyle and making healthy choices. | Developing social skills appropriate to age or stage. | Receives a level of physical care that ensures that the child is clean, adequately and appropriately clothed and kept warm. | Provided with c to actively parti stimulating acti there may be d disadvantages. |
| Protected from avoidable physical dangers and health hazards outside the home. | Receiving appropriate health care and guidance from services. | Responding positively to cognitive challenges in an educational setting. | Receives sufficient and suitable nutrition. | Provided with a support when i |
| Protected from the risk of exploitation by others (e.g. through Internet) | Receiving appropriate health care and guidance from main carer. | Motivated to attend and participate in their education. | Lives in an environment which promotes their cognitive and emotional development. | Assessing and risks in recreati play-related se |
| Aware of harmful risk-taking behaviours outside the home (e.g. drugs, alcohol, inappropriate friendships, etc) | Attending health services and medical screenings and taking prescribed medication when necessary. | Meeting or exceeding appropriate levels of educational attainment. | Receives additional support and care when they need it. | Responding po physical challer recreational an related settings |
| Receiving appropriate guidance from parent/carer about harmful risk. | Being helped to effectively manage any long term illness | Demonstrating achievement across a range of non. | | |



CYP MHIs and GIRFEC assessment of wellbeing

- MHIs provide population data
- MHIs enable – where data exists – an assessment of the state of CYP well-being
- GIRFEC well-being indicators are a way of capturing and recording concerns
- Under GIRFEC assessment and analysis for the individual child/ young person involves the My World triangle and the resilience matrix

GIRFEC National Practice Model

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Observing & recording
Events / observations /
other information

Gathering information &
analysis

Planning action & review



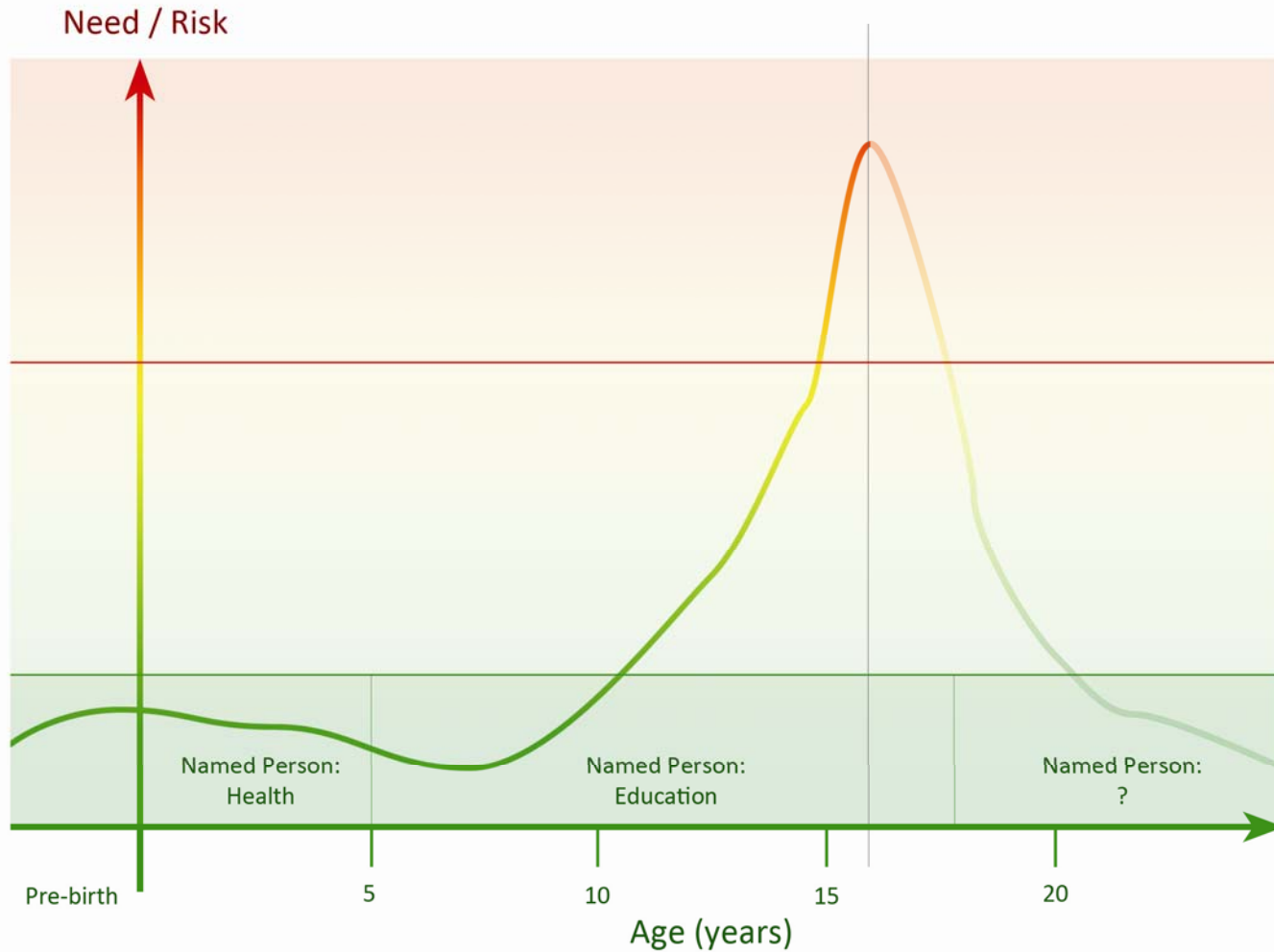
Well-being
Concerns

Assessment
Appropriate, proportionate, timely

Well-being
Desired outcomes

DRAFT

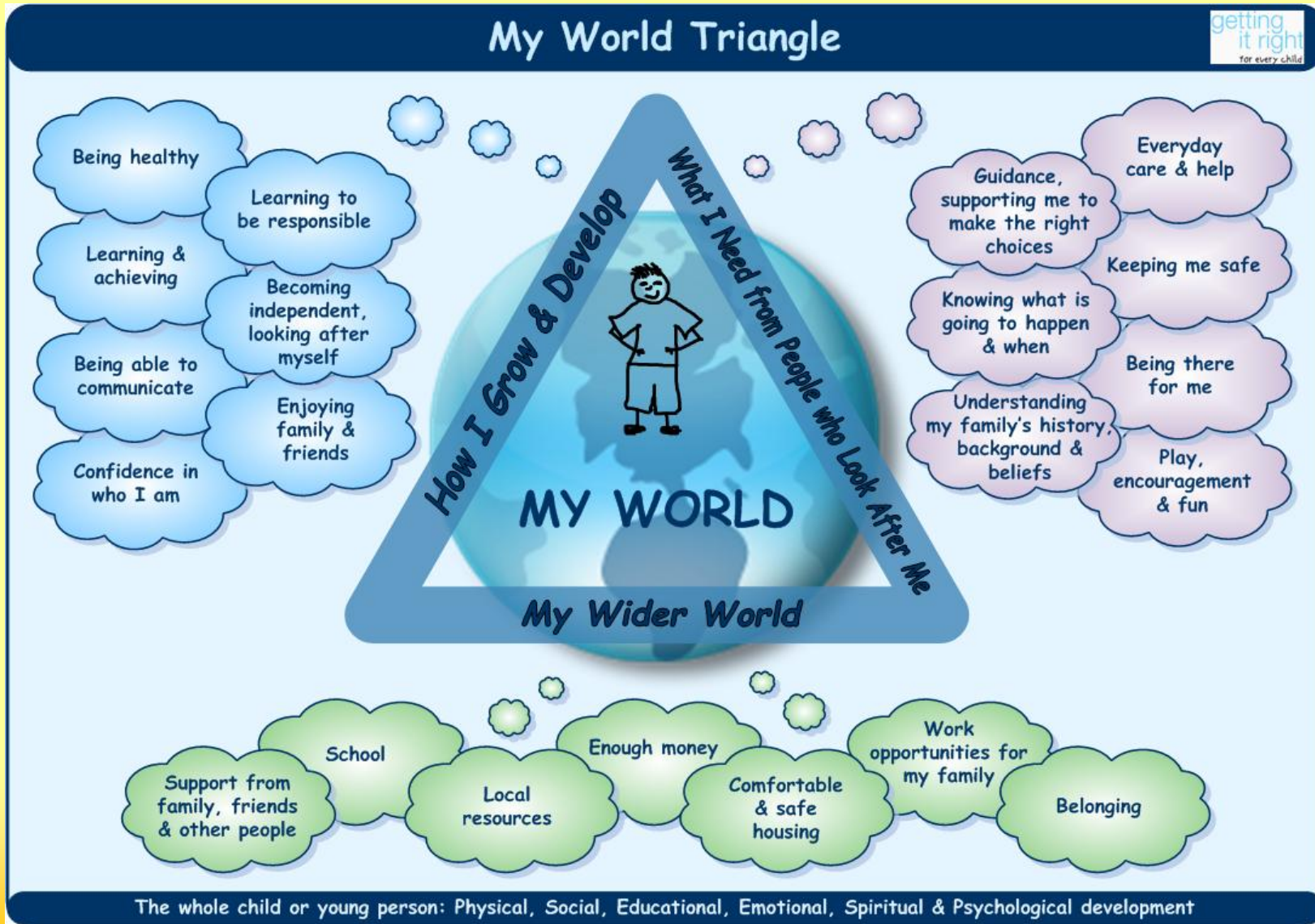
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My world triangle

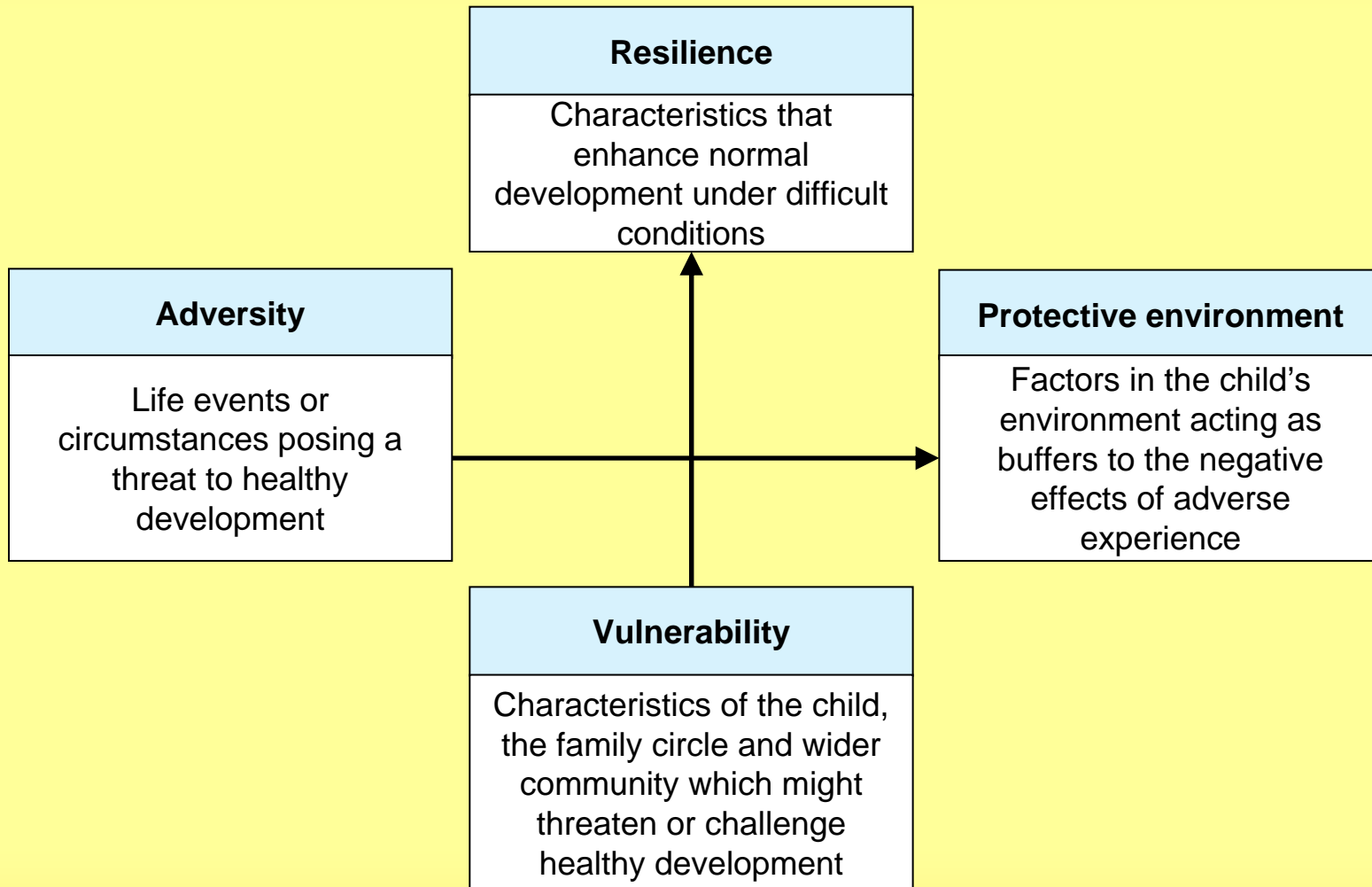
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Resilience Matrix

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Benefits

- Applying the GIRFEC approach supports the better outcomes for children and young people we all want to see
- Re-enforces the children's rights agenda
- Leads to better experience and understanding by children and families of the reasons for action and the value of the health resource
- Issues are spotted early and acted on appropriately
- Better trust among agencies to improve multi-agency working, supported by training
- Better quality information exchange
- Freeing up of resources

Progress

- Community Planning Partnerships coming on board – ongoing work to implement key elements of GIRFEC approach across Scotland
- Chief Executives in health asked to plan
- All eight Police forces agreed guidance and common concerns form (based around well-being concepts)
- Red book for all children – includes National Practice Model
- Revised child protection guidance sitting within GIRFEC

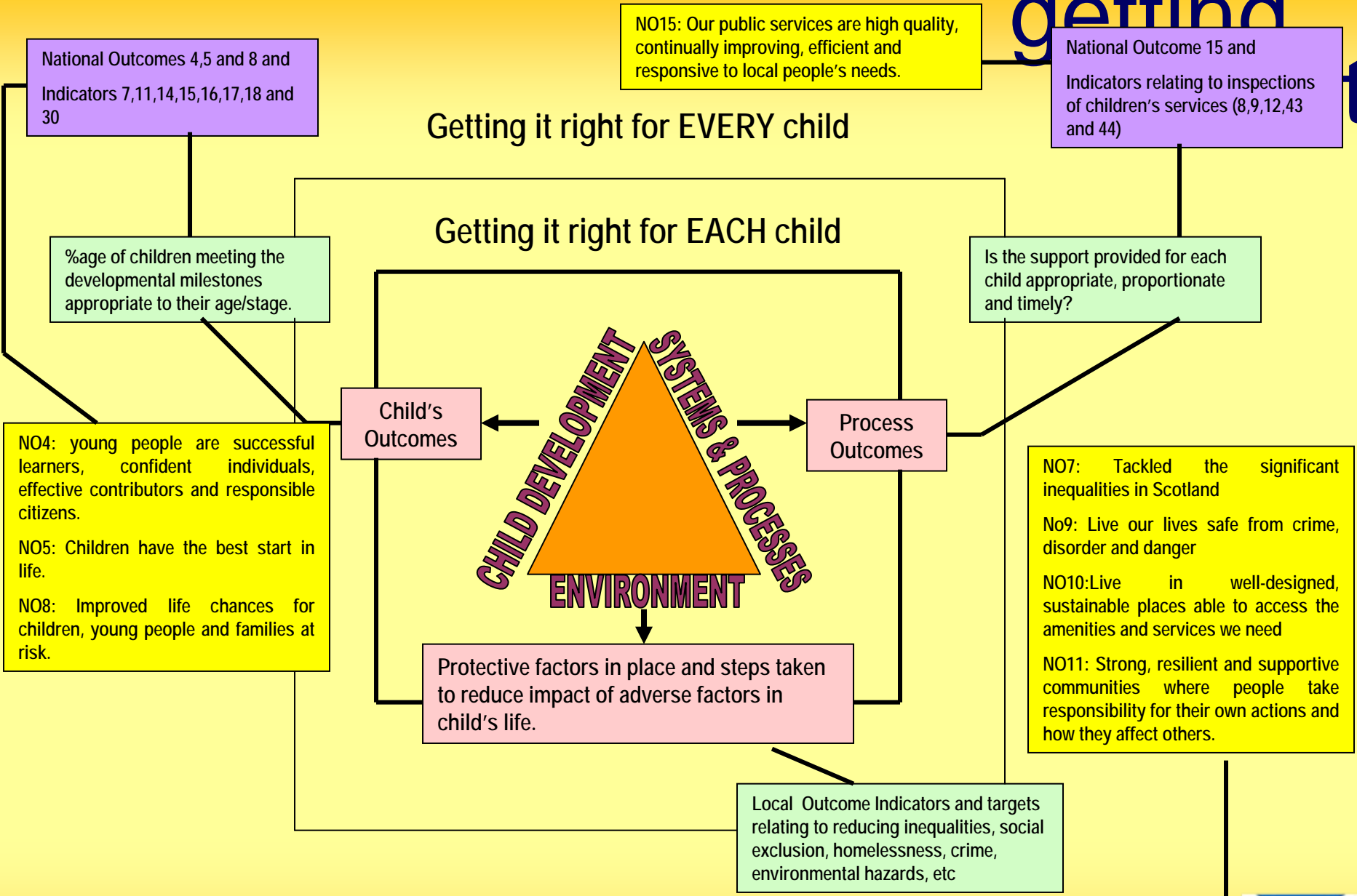
Future

Planned

- Rights of Children and Young People Bill - 2012
- “Children’s Services Bill” - 2013
- Scrutiny/ performance improvement being aligned with GIRFEC: pilots for 2012

Getting it right for EVERY child

Getting it right for EACH child



Mapping *Getting it right for EACH child* on to the National Performance Framework to ensure we are *Getting it right for EVERY child*.

Early Years

Existing data: immunisations; smoking/ alcohol during pregnancy; birth weight etc

Possible future population data:

- Early Development Indicator?
- Aggregate of individual outcomes data – based on SHANARRI/ well-being?

Supporting policies

The three Social Frameworks

- **Poverty**
- **Early years**
- **Equally well**

Health

Education

Parenting