

Getting it right for every child (GIRFEC) refresh – Practice Guidance. Children's Hearings Scotland Consultation Response.

About Children's Hearings Scotland (CHS)

A Children's Hearing is a legal tribunal made up of trained panel members who volunteer their time and skills to safeguard and protect the rights of children in Scotland.

Scotland's Children's Hearings are founded on the principles established by the Kilbrandon Committee (1964) in its review of youth justice. The review examined the effectiveness of arrangements for children who came into conflict with the law and led to transformational reform within youth justice and child protection. Kilbrandon recognised that, in most cases, the children and young people appearing in the courts charged with offences were themselves vulnerable and in need of care and protection. Scotland's Children's Hearing System was established in response to this review to protect the rights of children that come into conflict with the law and those that are in need of additional care and protection.

The Children's Hearings is a tribunal in which children, families, professionals and Panel Members work together to identify what help children and young people need to reduce offending, protect them from harm and help them achieve their full potential. Panel Members make legally binding decision as to whether compulsory measures of supervision are needed to address risks to children and young people's welfare and ensure that their needs are properly met.

The Children's Hearings (Scotland) Act 2011 introduced the role of National Convener to oversee appointment of the Children's Panel Members who make decisions at children's hearings. CHS was established to support the National Convener to deliver their statutory functions to protect the best interest of children. These functions include the recruitment, selection, training of and support of empathetic and skilled volunteers. Maintaining the independence of CHS and the National Convener is an essential statutory requirement. CHS is governed by a Board of non-executive members accountable to Scottish Ministers and the Scottish Parliament.

CHS vision is of a children's hearings system where everyone works together, making sure that all infants, children and young people are cared for and protected, and their views are heard, respected and valued. CHS aim is to improve outcomes for infants, children and young people in Scotland by supporting circa. 3,000 volunteers to make high quality decisions about their future and help hold to account statutory bodies responsible for implementing these decisions.

CHS is committed to keeping The Promise to Scotland's children, by working with all our partners to make the improvements identified in the Independent Care Review. At the heart of this commitment is having a deep understanding of what matters to

children and their families, listening to them, understanding the impact of trauma and poverty and enshrining children's rights in everything that CHS do.

Consultation Response

CHS welcomes the refreshed GIRFEC guidance. Having a consistent rights-based policy and practice framework for supporting and safeguarding the wellbeing of children and young people is essential for improving outcomes.

The GIRFEC framework aligns well with the Kilbrandon principles that places the wellbeing of children and young people at the heart of the decisions made within CHS. Operating within a legal tribunal framework CHS is reliant on partners delivering consistent practice and providing high quality information to help the panel make good decisions. The GIRFEC guidance has a key role to play in helping to ensure that high-quality information is provided to panels to enable them to make the right decisions in the best interest of the child. Furthermore, the refreshed guidance provides an opportunity to clarify accountability arrangements for statutory partners responsible for effectively implementing the decisions of the hearings.

Children's hearings take place across Scotland and the information provided to panel members and the support available to children and families varies widely. In the local authorities areas which have embraced the Child's Plan and the roles of named person and lead professional, we have experienced that the interplay between these roles and the children's hearings system have work well with clearly defined responsibilities and accountabilities.

GIRFEC Policy Statement

The refreshed GIRFEC policy statement is detailed and comprehensive. It provides a helpful overview of all the key policy areas. The focus in the policy statement on the implementation of UNCRC and children's rights is welcomed and closely aligns with CHS policy and practice priorities. The policy statement clarifies the refreshed GIRFEC values and reinforces the importance of embedding GIRFEC to improve outcomes for children and families in Scotland.

The policy statement primary audience seems to be practitioners and policy makers. The easy read version is a helpful addition to those who wish to understand the principles and direction of GIRFEC policy, such as children and families. The length of the current policy statement may reduce its accessibility for practitioners and stakeholders who are required to manage significant and competing demands within children's services. Further summarised resources would assist practitioners in clearly outlining how the policy environment should inform their practice. It would also be helpful to illustrate how this guidance directly impacts on the lives of children, perhaps through the use of specific case studies.

Practice Guidance on the role of the named person

Whilst we recognise the potential benefits of the named person, professional groups within local authorities and health boards are best placed to comment on the feasibility of implementing this policy ambition, both in terms of their capacity to provide this

service expansion and how the role may operate in practice. Given how pivotal those service providers will be to realising the ambitions of a named person, it is important that any concerns around those issues are addressed in full.

A key strength of the GIRFEC model is embedding a consistent national framework for safeguarding the wellbeing of children. The practice guidance states that the role and function of the named person service “will vary from area to area”. Ensuring services can function at a local level is an important consideration, and essential if children and young people are to see the effective delivery of improved practices. However, it seems highly likely that the named person support available to children will be inconsistent. A well-presented set of clear practice standards, expectations and investment in a national training programme will help address the level of inconsistency, and help to ensure transparency and accountability.

Within the context of CHS, any individual, including children, family members and professionals, can make a referral to the Children’s Reporter if they believe a child would benefit from the support of a Compulsory Supervision Order (CSO). We would welcome a consistent approach to referrals which the named person could bring with the named person progressing a referral on behalf of the team around the child.

There may be opportunity for the hearing system to work alongside the named person service to track and better hold to account those statutory services responsible for delivering and monitoring the decisions of panels and the child’s plan. The five key questions that the named person is responsible for assessing in the practice guidance would benefit from further analysis in relation to the interplay with children’s hearings. Although the questions are fundamentally sound, they do indicate that the named person will have decision making powers. There is potential for these core questions to be considered at children’s hearings. Given the breadth and importance of these questions we would suggest that there needs to be a high level of scrutiny and quality assurance in order to equip the named person with the skills and authority to make consistently good assessments.

The section under paragraph 25 on transition points could be clearer and requires further work. The guidance states a new named person would assume responsibility for this role at every transition point. This could be disruptive and potentially traumatising for the child. For example, a child on a CSO who experiences multiple moves between areas will have to try and establish new relationships with a new named person each time they move. It is questionable whether this would be in the child’s best interests. Given that a key role of the named person is to build relationships with the child and their family there is a real risk that the transitions between the named person will dilute these relationships and potentially reduce the voice of the child.

Practice Guidance on the role of the lead professional

The guidance on the role of the lead professional is clear, easy to understand and well laid out. The guidance effectively outlines the role of the lead professional in coordinating the child’s plan.

The child’s plan should be the sovereign document for ensuring the rights of children are upheld and the promises within the plan kept. A common feedback theme we have

from panel members is that the information presented to them is often inconsistent in terms of timings, quality, length and presentation. An effective child's plan has the potential to improve this. This could also help reduce the number of deferred hearings, which are unsettling and sometimes traumatising for children and their families.

Where the guidance would benefit from greater clarity is in relation to the lead professionals responsibility for ensuring compliance, accountability and delivery of the actions in the child's plan. In our experience, by the time a child is placed on compulsory measures of supervision, the lead professional will be the child's social worker. We acknowledge that the lead professional could not take responsibility for delivering all the aspects of the plan, however, the local authority has a duty to implement the decision of the children's hearing and the measures contained within any order the hearing makes in respect of the child. There is an opportunity to strengthen accountability and scrutiny functions within the guidance in respect of CSO's and CHS would welcome a discussion with the GIRFEC Team and others on how we can collectively improve accountability structures to ensure the rights of children are more consistently upheld.

Practice Guidance using the National Practice Model

The refreshed guidance on the GIRFEC National Practice Model is helpful. The Wellbeing Indicators are a useful tool that are increasingly embedded in practice. The focus on outcomes has been one of the success of GIRFEC and it is reassuring that this is aligned with the rights based approach enshrined within the UNCRC. In CHS experience statutory and non-statutory agencies have varying degrees of knowledge of this practice model. The refreshed guidance has the potential to increase awareness, for example, by embedding it in all professional pre-service training. Caution should be exercised in relation to record keeping of the named person as outlined in paragraph 10.2, this need will need to be balanced out in relation to the child's rights to privacy.

My World Triangle is a useful resource that is well presented in the refreshed guidance. The focus on strengths, child development, trauma, adverse childhood experiences and positive attachments is compelling and persuasive. It would be helpful if the My World Triangle and Vulnerability Matrix was consistently presented in a child's plan and included in the information that children's panels receive.

Practice Guidance on Information Sharing and the Information Sharing Charter

The practice guidance on information sharing is necessary but difficult to digest in parts. The length and complexity of the guidance risks putting people off accessing it as a resource. Confidence and competence in this area is critical if information is to be effectively shared in a way that safeguards children's rights. Any anxiety about how and when to share information may create additional complexities in the system, or could lead to delays around critical decisions for children or young people.

Cross-referencing this practice guidance to the National Guidance for Child Protection is sensible, however, the six pages that have been copied into the refreshed guidance appear cumbersome and we would suggest that a summarised version could be used

instead. In contrast the Information Sharing Charter is clear, concise, well-constructed and easy to understand.