

Child Protection  
Committees  
Scotland



## Learning About Neglect Event Series 2022



Free webinar: Addressing Neglect and Enhancing Wellbeing:  
The role of GIRFEC in responding to the needs of families

Thursday 19 May 9.30-11.00

Speakers: Emma Hanley, CELCIS, Nicola Weryk, Camperdown  
Primary School, Aaron Brown, Hill View Nursery



Okay, good morning everyone. And welcome to today's webinar, the third in a series from Child Protection Scotland in conjunction with CELCIS. It is a pleasure to welcome everyone here today I'm going to hand over shortly to Colin Anderson, who's chair of Glasgow Public Protection Committee and also chair of the Child Protection Scotland neglect subgroup, to introduce today's topic, and also the guest speakers, of which there are three. Without further ado, hopefully Colin, you will be able to switch off your mic and we can hand over to yourself, just introduce the people to the webinar today. Thanks a lot.

Thank you, Joe. Yeah, the technical Gremlins have been chased away, so I'm now with you. And just to echo Joe's welcome. In this session, you'll be hearing from CELCIS' Addressing Neglect and Enhancing Wellbeing (ANEW program), which was funded by the Scottish Government as part of the National Protection Improvement programme. The programme was developed with a range of partner organisations that worked in three different local authorities to understand how best to address low level concerns, which if left and met could lead families to face greater consultations. As Joe said, we've had over 550 people subscribe for each of our sessions, and feedback post events has been very positive. I think this shows the increasing awareness of child neglect and issues impacting on child neglect. Indeed, Child Protection Committee Scotland child neglect subgroup had a neglect indicators report presented to us in April and this is something that we're supporting - that collection of data to help us better understand. And from 2017 some of the key indicators were presenting negative trends that included children living in child poverty, including children receiving food bank parcels, children living in temporary accommodation, obesity amongst primary one school aged children, children on the Child Protection Register with neglect as a recorded concern with domestic abuse also increasing. So that accompanied by the recent publication, which you can see in our Connect publication, from the Byswater Research Group, updating research showing yet more evidence on how poverty impacts on child abuse, and neglect makes this an ever increasing issue. And as I said, reflected in the number of people who have been attending this series. So getting back to the focus of today, through consultation, Getting It Right For Every Child or GIRFEC, as we now refer to it, was identified as a key lever for change a tool, which, if implemented properly, could have a significant impact on outcomes for children and families, focusing primarily on GIRFEC practice and early years and primary school settings. The session will offer attendees the opportunity to hear about the programme and explore learning in Dundee, of the three sites. So without further ado, I'm going to hand you over to Emma Hanley from CELCIS, who will also introduce from our site in

Dundee, Nicola Weryk and Aaron Brown. So over to you, Emma, I will come back at the end and Joe will coordinate questions that come in through the presentation. So you should have an opportunity to address some questions at the end of this session. Thank you.

Many thanks, Colin, and many thanks for the invitation to come and talk to you today about our learning program: Addressing Neglect, and Enhancing Wellbeing program. As Colin said, I'm joined today by Nick and Aaron who courageously stepped in and volunteer to be part of our first practice site in our first cohort in Dundee. And they have lived to tell the tale. So they're here to share their stories of taking part in the new programme. But before we turned to Aaron and Nick, I'd like to just spend a bit of time talking you through the background information to the work. So hopefully, I'm going to be able to share my slides with you just now.

So I'm hoping you can see the slides there. As Colin said in the introduction, this work really began as part of the Child Protection Improvement programme. So the recommendations that came out in 2016. And there was quite a wide remit. So we know and we've heard already through this learning series, just how complicated neglect can be. There can be many reasons why families end up navigating challenging waters. And we know that neglect can look different for different people at different times. We've talked in this learning series around the impact of individual neglect, about emotional and physical neglect. But we're becoming increasingly aware of societal neglect and the impact this can have on whole families and their children. And we're paying attention more and more to this, as we're thinking about the current cost of living crisis that families are finding themselves in just now. So we know there wasn't an off-the-shelf response, there wasn't going to be a single toolkit. And it wasn't going to be the responsibility of one single agency to solve neglect. If it was that easy, it would have been done already. So we ventured forth really trying to think about what do we know already. And we had a number of really important pieces of work that helped guide our thinking in those really early stages. And they became the foundations of this programme, really. So this was the work done by Bridget Daniels, the Brock Report, and the Christie Commission. And you'll see the headline there that Bridget Daniel says, perhaps we're over complicating neglect. And what she talks about is the importance of recognising that in our workforce in Scotland, we have really skilled folk who are able to identify and notice concerns, but it's what happens next, how do we ensure that those families get a really appropriate response to the challenges that they're facing. And the Brock Report says that we know folks with the families that head into difficult waters are often on our radar. And it's the fact that we don't get help at the right time with the appropriate support, that often means that families are left struggling. And these are the families that we were interested in and wanted to support as part of this work. Brock also tells us that in GIRFEC, we have a really good framework for thinking about a coordinated, joined up holistic response to getting the right support at the right time. And although we have really good pockets of practice in Scotland, we know that it's not been implemented consistently. And so families don't always get the good and positive outcomes that we'd hoped. In the Christie Commission, we have some help thinking about the work and the context in which this work is taking place. So really beginning to think about how do we strengthen assets? How do we build resilience? How would we think about those low level community supports which, if done well, could really help families access the right support again, at the right time. So we had our foundational documents, but we also had a number of lenses that were helping us think about how to approach this work. The first one Bronfenbrenner ecological system is all about relationships. And we've heard a lot about relationships in this series so far. And here we're thinking about who is it that sits around that child who can provide a buffer for that child who can provide that key relationship for that child. But we're also interested in thinking about those different levels of support sitting around that child. What are the interconnectivity between schools between families? How do we really understand more complex relationships that can help a child achieve really positive outcomes. We also wanted to attend to the developmental lens, thinking about the different ages and stages of child development and how neglect might look different

across those different stages. We knew we had a remit and a mandate to really think about an early intervention and preventative approach to how do we make sure that we're getting in and about families and providing them with the appropriate support as early as possible, so that these low level concerns didn't escalate and end up with children and families entered into the child protection system. Trauma Informed evidence also tells us about the importance of getting about and supporting families as soon as possible. We know the evidence tells us that trauma in early childhood can have long lasting implications into adulthood, and the wellbeing of adults.

Heckman also supports this thinking about early intervention and a preventative approach. He tells us that the early we invest in a child's wellbeing then the greater return will have on that economic investment. So the sooner we can support children to thrive and flourish, the more able they will be to be fully participating in their community live and being able to contribute as the move into adulthood. And last, but by no means least, we wanted to think about our change methodology. We wanted to think about how we took a whole systems approach to understanding the practice that would sit as part of this change work. And we knew that active implementation really attends to the human element involved in changing practice on the ground. It helps us to think about how to sustain good practice. And it helps us to think about how to scale up that practice. So armed with our various tools, and our various lenses, we ventured forth into the three local areas. And we were really keen that we lent into the complexity, we knew that each of these areas had different demographic profiles. And each one would want to respond to addressing neglect and those early concerns in a different way. So we started out by having conversations just sitting down and sitting alongside multi-agency groups, whether it was Health, Education, Third Sector, Social Work, and begin to ask those questions of what does the current system look like? And what could the system to be look like? How do we understand the current gaps, and what's available what's already in place that we can strengthen. So we're not starting from scratch, we're not recreating the wheel, but we can build the fantastic work that's already been done. So here are some of the themes from across the three areas that kind of describe the gaps in the system, as was in 2016. So you'll see that from their perspective, they felt that named persons or that function of the GIRFEC coordinator, were absolutely able to notice low level concerns, but they had nowhere to go if those children and families weren't reaching the threshold for statutory or targeted support. They also felt that often because direct support isn't always available to be delivered by that service. Referral culture was leading to families ricocheting between services, again, back to that idea of threshold. There are pockets of good GIRFEC practice, but not consistent in the delivery. And that practitioners worked well together on an individual basis, but the agencies weren't always communicating well with each other. And that a lack of availability to low level supports could have huge impacts for families in the long run. And you'll see that what we were hearing from those local areas was absolutely mirroring what we had also learned from Jackie Brock, and from Bridget Daniels. But we also heard about what was working in the system and where these areas would like to strengthen support. So we heard examples of great collaborative working and relationships. But how do we make sure that the systems are in place, that these relationships weren't just down to the individual, but they were absolutely systems wide? We heard, again, of great examples of relationship based practice. But how do we strengthen that? So it was delivered consistently? How do we empower families in the decision making processes about their own lives? How do we ensure that all practitioners are aware of what it means to be trauma informed? And how do we build on those community assets that are having great impacts, but for a few families? How do we build and scale those community assets up? And what we were learning as we were hearing these areas that could be strengthened was actually, we were talking about GIRFEC, we were talking about a really intentional implementation of GIRFEC, how we strengthened supports to practitioners and how we provide access to services at the right time.

But we also know that GIRFEC has been around for a really long time. And we've not always seen outcomes for children and families in the way that we'd hoped when GIRFEC was thought through initially. We also know that the definition you know, if we keep doing the same thing over and over again, and expecting the same outcome, so people are going to give us some strange looks. So we needed to think carefully about if GIRFEC was going to be the core and the leverage point for addressing neglect and those low level early concerns. What do we need to do differently? And what we know when we dig into the evidence is that often practice guidance documents are rarely designed with implementation in mind. So it is often left for the local areas, or even individuals to make sense of those practice documents, and to translate those documents into practice. And that means that often we end up with pockets of good practice, as we've said already, potentially, really inconsistent delivery of what was a great idea in conception. So we needed to stop and pause and think about what else do we know, how do we bridge that gap from a really good framework into the practice so that children and families will achieve the outcomes that were hoped. What we do know is that quite often when we're thinking about translating policy into practice, we tend to have a number of default methods that we use, that we hope will have an impact on practice on the ground. So we like to send out and disseminate guidance documents, we might think about consultancy support. We send people on training, we might pass a law or a mandate. Often there can be, if we're lucky, an injection of funding. And we know that organisations like to focus on restructuring and the processes through which families journey, but which don't always have an impact on the actual practice itself. So while all of these elements are absolutely essential, they don't take us far enough, in really beginning to see the translation of that policy into practice on the ground. And we know that a key a key component that's missing is coaching to that practice. Now, I actually found this really difficult to take at first. Being a trainer in a previous life, I always had this idea that I ran really great sessions, and people would go forth, and be able to change the practice in the context setting. So this evidence that comes from education was a bit of a blow, I have to tell you, but as you can see, on the left hand side, it breaks down those components of really good high quality training. So thinking about theory and discussion, a demonstration of that practice and training, and then an opportunity to roleplay or practice the skill within the training context. But you can see that all of those training components have really little impact on that practitioner been able to go away and practice that new skill in the in the practice context, the thing that absolutely makes a difference is coaching to that practice, in that practice context, and you can see that the difference from five to 95% of any cohort, who were then able to continue to demonstrate that practice and to continue to sustain that skill. What we also know about making that shift from policy into practice, is that we need support to make that happen. And we need a team to drive that change forward. So you'll see here on the left hand side of the graphic, this is evidence that comes from Health. And the idea here is that within Health without a team, it takes about 17 years for 14% of that particular cohort to use that new practice or innovation as its intended. But if you have a team driving and holding that work, thinking about the infrastructure that sits underneath that practice change, you'll see that 80% of that learning cohort will have taken on that practice within three years. I think those figures are really interesting to me about the importance of having people to hold and contain this work.

So I'm going to move on now to talk to you about Dundee's design. And we talked a little bit already about what happens when families do not get their needs met in the right time. And Dundee we're really keen to focus in on that gap between universal services and then more targeted or statutory services at the top of the triangle there. And through consultation, they decided upon three strands of a design. So that first design, meaningful family engagement and coordinated child's planning was really about how do they move away from doing to, to working with? How do they get Child and Family voice in any decision making about their lives. The second strand, strengthening the personal

GIRFEC practice, was really about a hope for them to think how do we get GIRFEC implemented across Dundee. But knowing that it's not down to the individual practitioner to make those practice change, there has to be a whole system's approach to get those support and infrastructure in place. And then finally, they wanted to think about access to the right support at the right time, which will be attended to through a fast online referral tracking system. At the heart of this design, was really a hope to shift the imbalance of power from between service providers and families who were looking to engage in a different way in decision making around their lives. So I'm going to pause there for a second, Oh, sorry, next slide before we pause. So back to making it happen. We've talked a little bit about the implementation team and the role there, one of the first things that we did in Dundee attending to the evidence from active implementation was to set up a cascading model of support. And the Dundee multi agency implementation team were absolutely at the heart of this work. And the key role for them here was to really begin to think about how to create readiness, how to support those practice sites, the Health Visiting Teams, the primary schools, the nursery schools, how do they create readiness and support a learning environment. They were also key in helping the collection and analysis of data. Now, as we began this work, we didn't have a set of data tools just ready for us to use. So those have been in development with Dundee over the past while but perhaps most importantly, the Dundee multi agency team were also really key in providing that link between practice that was happening on the ground and strategic leadership. So they met regularly and were able to help leadership think about how do we clear the path? How do we clear the barriers for that new practice to take place? What permissions do we need? How do we create that learning environment and a culture within dandy that allows us to practice in a new way. So now I'm going to pause and I'm going to hand over to Nick and Aaron, who are going to share their experiences of being part of that first cohort in their new programme.

Thanks so much. So I just want to introduce myself. I'm Nick Weryk. I'm the head teacher of Camperdown Primary School in Dundee, and just to give you a little bit of context about the area in which I work, so we have about 79% of our children living within [SIMD](#), one or two, we have a great need for speech and language in our area. A lot of children are waiting lists for medical, CAHMS or Armistead Child Development clinic. So that just sets a little bit of context of what we were dealing with. Aaron was part of our team at that time down at Camperdown. So we had a bit of a discussion, we knew ourselves, we were having a high level of Team around the child meetings, they weren't at Social Work level, but above that universal level. So we were trying to always think about, okay, they're not at social work. But where do we go with this? We also recognised ourselves that we were very much missing the child's voice within our meetings, very few of our children wanted to attend. And so that was something that we were quite aware of, and wanted to do something about. We had a big nursery class, and we're working very closely with health visitors. So that was an area that we thought we could improve on as well. Now looking at our own workloads, there's myself, the depute and Aaron, who would chair team around the child meetings, our workloads would become quite heavy at times when we had back to back team around the child meetings, or admin tasks. So we wanted to look at a way of how could we do this better. So my first experience was working with Children 1st, I had a family going through a team around the child meetings that we had done for quite some time. Now this family had approached Children 1st themselves, and then I received a phone call asking if they could come down to one of my meetings. Now, my initial reaction was that, oh, gosh, you know, what's this all about? What am I doing? Because I was felt the meetings were quite good. But I quickly had to change my own mindset and think, no, this is not about me, this is about this parent. And they want some support. So we have to look at this. So this is where they first saw the buddy system in action. The buddy met with the parent prepared them for the meeting. And they also came to me as the chair person and told me what the parent wanted to say. The child also had a buddy, now this child didn't attend their meeting. So I was able to see the plan that we had made, that had posted notes from the child written all over it, what they wanted to feedback. So already I was able to see what a different tone in a meeting and it felt very different. And I could see

the benefits without doubt. So for me as a head teacher of the school you had made by in straight away. So I went back to the team. And said, look I've been part of this, I think it's really something we've got an opportunity in Dundee. I think we should do this and the team were in total agreement that we were all in the same viewpoint of what we wanted to do. So I think one of the big parts for us was about our readiness to take the work on. We were all really up for doing something very different, working differently. And that actually felt really empowering for us as a team within a school because we had that permission that we were trying things a bit differently. And it was a lot of trial and error, I have to say, when we first started. We were trying different models, we were using observation tools to really look at our meetings, get data to where we could improve. So you have to be ready for that we had an educational psychologist on board. So she came in to observe us quite a lot of the time chairing meetings, but she tended to be part of the meeting anyway. So it wasn't like somebody in the corner with a wee checklist. So it all felt quite natural. We used feedback from parents, feedback from our pupils. So using the data all the time, when we met with the CELCIS team, we were discussing about what was working, what we felt we could improve on what areas of focus we could do. So it was really questioning all the time our practice. And, you know, sometimes we would have quite big meetings with the CELCIS team. And it was really about being open and honest about procedures that we had what we thought we could improve on. Now, it really became quite quick that the CELCIS work, their new work would fit really well with our vision values and aims as a school. So this became a working project for us in our school improvement plan. And I think that was really important that we gave this time and the effort because it wasn't just us as a team. As we'll talk later, we'll talk about the buddies. So it was cascading that work really throughout the school. But the one thing that became really, really important to us was about relationships. Now we had quite an open relationship and our team that we were all able to sort of speak freely and say, you know, Nick reel your head in, or, you know, that was really good, or this was great. And we didn't sort of step on each other's toes, I think that's really useful. But it was also looking at part of our group was our school and family development worker, she came into all our meetings as well with CELCIS. And Stacy is a huge part of our team too. She has different relationships, perhaps with families than what we would maybe have as head teacher or senior in the nursery. So really you can't underestimate the power of relationships. And that really has been, you know, key for all of this working, and relationships with the CELCIS team, you know, it became, we got to know quite a big team. And it's really nice. And even now down the line, you know, we've not seen Emma for a while, but it's really nice to check in with people. So yeah, relationships are absolutely key and that honest discussion. So I'm gonna hand over to Aaron now who's no longer my senior in the nursery but has moved on. But he can tell you from the perspective of being a part of that team, what that felt like for him.

Yeah, so we're going to talk a little, but first off it's nice to see everybody today, I want to talk a little bit about my time with Nick, and what it looked like and felt like to join and work with CELCIS. So working with Nick, I think the two words that really kind of come to mind, whenever we start working with CELCIS, it really a kind of excitement. And then just to echo what you kind of said about empowerment, but it's not just about empowerment of the children and the families, it is very much so. But it's also about empowering the teams that we work with, and the abilities to try something new. So whenever we had that sense of empowerment, so working with Nick, I really had that sense of empowerment, and ability to try something new, and try something different. Because we knew that what we were doing wasn't really working, it wasn't really getting it right to the children, families, and the way that we really wanted it to. So I think at the heart of that, we have this really good working relationship. And we were able to give honest and reflective feedback. But more importantly, we were ready for that feedback. We were ready to actually hear what could be better, it wasn't about being precious about our own practice or about, working with other people, it was

about how can we actually make it better together. And that was where it was exciting. Because it was yes, let's try something new, let's do something a little bit different. Let's really listen to children and families here. And what came from that, at least for me, was also new collaborative relationships with other professionals. So really working closely in a meaningful way, with the health visitors, who are the name person at that time. And working in a way moving away from whose job to chair whose job to take minutes who does this and actually, let's just work as a team, see how we can all support each other and the family and children in the best possible way. So to me, that's what it felt like working with Nick, I just haven't that ability to try something new, and that permission, and also to be involved in every step of it. So Nick talked quite closely about working with CELCIS. I had that opportunity to be part of just about all, well the majority of those meetings. So I feel like I have a relationship with the CELCIS team. I think that was one of the things it wasn't just one person joining the CELCIS. It was a whole team joining the CELCIS and joining the implementation, which you kind of talked about earlier and Emma explained much more eloquently than I can. So then it was to take that practice, and to continue to support a new team to join that practice and to join that work. But I'll talk a little bit about that later. And I'll turn it over to Emma here to keep going back to the slides.

Thanks so much both. And it's actually lovely to hear. And we knew that as a site, you were you were ready to try something new. But what you're describing, there is the importance of leadership. If you are able to create that culture for a learning space. So we didn't have an off-the-shelf toolkit, we were coming in and testing out and trialling as we went, and the importance of being open and having that space and trust with each other, to be able to try things out and see how they go. And I guess we're just really acknowledging that that trust and those relationships happen in parallel, right across this piece that we have to build those relationships also with children and families to try out what can we do? Is this working? How do we return to it so lovely that you've been able to describe those parallel processes. Thank you. So I'm going to attempt to share my screen again, we'll see how that goes. And we're going to move on to thinking in a little bit more detail about Dundee's design. So Aaron and Nick have already started to talk a little bit more about the different strands of the design, and mentioned the buddy programme. So as you'll see, as you'll remember, Dundee were really focusing on that gap between universal services, those early low level concerns. And the first one is really thinking about how did Dundee get the voice of children and families in any decision making programme process about their lives. And this is attended to through the work of the team around the child buddy. And this was a rights based approach to having the voice of the child in the team around the child process. And the team around the child buddy is actually built on a child protection buddy model that was developed by Children 1st. And Children 1st are absolutely instrumental in getting this work off the ground as an already said, such a powerful approach to really helping us rethink what it means to have the voice of the child in any process. So what the approach does is it builds on any relationship or positive relationship that that child has with an adult in their lives. And that adult is then given the time the training and the space to support that child to prepare for the team around the child process. Ideally, you know, a run up of about six weeks, get into build that relationship, so that the child feels prepared either to attend the meeting themselves, or they can have their voice heard in that meeting, represented in different ways by the buddy. As you'll see there, the idea the values and principles that sit underneath the buddy practice is that the buddy has absolute empathy, offers containment, that the approach is trauma informed, it is strengths based and solution focused. But again, we're also coming back to that idea of trying to disrupt some of the hierarchical structures that we often see in this team around the child process. So I'm going to pause there. And once again, return to Nick and Buddy, Not Buddy and Aaron, who can help us think about how they began – you suit the name buddy, though, to be fair Aaron, and what it was like to begin to start to use this model in their settings.

Thanks so much. And without a doubt, the introduction of buddies was our biggest change, and it's something that's had the biggest positive impact for us at Camperdown. I am really, really lucky that I

had a staff team that were up for this challenge and willing and able to take on so all the support staff within school. So my PSAs (pupil support assistants), learning with care assistants, everybody took training with Children 1st. So what I did was made some protected time for that to happen and which was on an inset day. Children 1st came down and they worked with the support staff. And there was no management. It was just the support staff with the team. And we felt that that was really important that they got this protected time.

And what they did was they carried out their training and staff were really, really up for this role, really wanted to take it on board. So we started to introduce buddies. And so what we would do is we would ask the children before a meeting, who they would like for their buddy. What we had to make sure as make sure we had an equal sort of split so somebody wasn't sitting with far too many buddies that we couldn't cope with. Now, I was lucky enough that I was able to do a whole school assembly every Monday, before Covid times, I have to say. And I used to give that time over to my support staff. Now, I don't know about you, but trying to get support staff together can be quite tricky, because they all have start and end times that are really very different. So that was a good time through the working day where they were able to meet together. So it wouldn't be for long, maybe, you know, half an hour, 45 minutes, and they would talk through about their practice. And, then they started to develop some resources that they would use. And I had one person from the support staff team that made the link with Children 1st. So what then happened was, that didn't have to come through me at all, whenever anybody was selected to be a buddy, they would just make contact with Children 1st themselves. So that was great. And I think the support staff really feel empowered by that piece of work. And we have kept that going all the way through lockdown, and the buddying still went on, we tried various ways of getting the buddies to meet. And we also continued now, I think we're maybe about four or five years down the line. So on a Monday afternoon, the support staff are not timetabled to anything with classes in our school, they get time together. Now it's 45 minutes. And if there's something that happens in the school, then we deal with that. But I think it's really important to make sure they've got that protected time. And also when we're timetabling for the support staff, we make sure they have time on their timetable to carry out this buddying time. So it's not an add on, or something that they've got to find time to make to do. It's scheduled. It's important, and it's regular, and the children know when this is going to happen. So this is just know part and parcel of our practice now of how we do things. And then our conference room, at school, the buddies have all made a little profile page of themselves about what they like, you know, so the children can come in, there's a picture of each buddy, they can, you know, read out what they like, what they dislike, and what their hobbies are, and then the children select from there. So it's quite a nice piece of work to do, because you think the children maybe know everybody in the school, but they don't always. So we have run that model in our school. And we've started it in the nursery now as well, we've got buddies there, too. So I just want to give you maybe two examples of the buddy work that really worked well for us. One example we had was a child who has been going through the team around the child process for quite some time, but unfortunately suffered a bereavement recently, and this was something that she wanted to share, but obviously didn't know how to go about this. So it was a very powerful piece of work. She asked her buddy to be able to share that at a meeting, she came to a meeting excused herself at that time, and asked her buddy to share, it was hugely powerful what she had to share, it changed the whole tone of the meeting because it was so based around what the child was saying at that time. Everybody around that table was working together to think right, how do we support what's just been said. So it wasn't about how I feel about it, how the parents felt about it, or anybody else around that table felt, it was purely around that child, and we were able to make a plan that suited. And when we fed back that plan child was really, really happy. So much so that afterwards, she told everybody that it was the best meeting ever. Now, she wasn't present for the whole meeting, she only stayed for the beginning and came back to the end. But for a child to say was the best meeting ever for me, you can't do any more than that. That was superb. The other example I had was our

school and family development worker, Stacey, again supported actually a parent this time to be a buddy coming into school. Now, what we had here was a child that we didn't realise had moved from one parent to another parent, and we only picked up something was maybe wrong through our processes in school, when some of the adults were filling out little cause for concerns, noting that maybe, you know, not having the right clothing on missing socks, you know, not as clean as perhaps they were before, so all these little bits of the puzzle that we asked staff to pass on. So it was actually one of the early concerns mapping exercises that myself and the depute would do. And we came back together to say, you know, what concerns have you had in what have you had and we noticed that we both had concerns in for this child. So we thought we need to do something here. So we started to unpick and have a little bit of a chat.

But that relationship with Stacey was so good because the child wasn't necessarily telling us but told things to Stacey that we were able to get in. Now it happened then that this child we had got down to be a young carer, but we realised that she was living with a parent who had had a stroke and we were able to make arrangements there. Now this parent, because of Stacey, felt that they had a voice, basically, and they were able to come into school, which is something that we would never do. So we were able to do things like get online shopping set up for this family, which was a huge, huge benefit for them to be able to get their shopping delivered. Get the young carers involved, get benefits sorted. And the relationship that Stacey built with that dad was amazing, to the point that he came along to parents night for the first time ever. And that was just so powerful as well. And Stacey supported that too. So that was two examples that I've got so many more. But that's just two examples I can give you. So really, the role for the buddy for me is it's about making sure the children that are prepared, the adults are prepared, but also the chairs of the meeting are prepared. Nobody should be blindsided by comments coming into a meeting. And I've been in meetings where you think, gosh, where did that come from? I wasn't prepared for that. So it's changed the whole tone of it. And we start every meeting with the child's buddy, the child's voice. So that for us has completely changed. So and again, from my point of view, my learning within this as being a leader was just thinking about who in your team is best to support, you know, we can't do everything. And often our relationships are not the same as perhaps somebody's in the nursery. Or, as I said before, Stacey, so it's knowing your team and how to build those relationships best, really. So that's been my experience.

So, I guess to talk about the buddy work. A lot of the things I learned when the kind of implementing that approach was from my time at Camperdown. I won't go back everything that Nick said as she just said it so well with, you know, kind of how that was implemented. But I moved to another nursery, and it was a brand new nursery. So it was just that it was a brand new team. That was almost like starting from scratch. So we developed a vision with the children, families, the staff and all the other professionals, and our vision at Hill View Nursery was to empower children and families to grow together. So the buddy work just that so nicely with that. Because what we were trying to do is we wanted to actually empower and ensure that all children and families had a voice. So that meant that the team was ready, because that's what they wanted, they wanted that. So I think they were jumping at the opportunity to become buddies at that point. Initially, we had just like Nick, copying kind of her model, we had Children 1st then to do training with all the staff the initial kind of input, and then the staff that would become buddies had them out regularly. We've since moved on from that time. And Children 1st is at this point unable to support the work. And the team are supporting each other to continue that buddy practice. So what that really meant in practice, I think was the most powerful thing that probably you will want to hear about is how it really changed the meeting. And the entire approach, at least for me, it changed the tone of the meeting. It's almost something you have to be in the meeting to feel it's you know, it's hard to almost put in words sometimes, I think. So, just like Nick, I think I'd like to give just a little bit of an example. I think it's the nicest way to hear about it. I've changed obviously, all the details. So if you know, just for GDPR

reasons I have changed everything. But we had a child in the nursery that was quite unsure about coming into nursery, and was really not quite competent to talk much or interact with other staff members, let alone other professionals. And really had quite limited verbal communication. So this child chose a buddy, and that staff member met with them regularly. And over time, they decided that they wanted to come to their meeting. And they wanted to tell everyone where they wanted them to sit down. And they told everyone where they had to sit in the meeting, and where they were going to sit in the meeting. And they decided that Okay, I'm ready to actually come into the meeting and share what I think which to put in the context. This child was about three and a half years old when they did that three and a half years old to walk into a room with their parents with other professionals. And some they hadn't met before and didn't even know. They wanted to take pictures. So they took pictures to show all the people in that meeting what they wanted to do with their time at nursery. So what that meant is that we listened we had to listen, they were there. So after that they chose to leave. And the whole plan was intertwined with what they wanted. So some of the targets were slightly different and not based on what they were in the nursery. It was almost making it more meaningful. So we came back to the next meeting, which was different to previous meetings. And the actions they actually wanted were done. And the families were proud, the child knew they were being done. So to me, that was the impact. The second one I want to talk about is a little bit, sometimes in early years, you know, we hear the child's voice, the buddy's going to be their voice in a meeting. And they have, I always like to say, and I've copied this from Loris Malaguzzi, two, or three years person, you know, children have 100 languages. And sometimes as adults, we forget to listen to all of them. So we had to think of, like Emma said in her presentation of creative ways of capturing their voice. So one child, it was through video. So we had a video of something that was very meaningful to that child that we brought to the meeting. And again, it had the same effect, it had the same effect of changing the tone of the meeting, it was more solution focused, it was more about what was meaningful to that child. And to me, that was that's why that's why it's just, it's so powerful, because people are more engaged in meeting actions are happening. And the supports that you're putting in place and the acts you are putting in place, are going to have more meaning to the children and families. And it just links to how we keep the child at the centre of it, because we talked about, you know, team around the child. So all of our meetings, just like Nick's start with the child's voice, and then they move on to the families voice, and then the other professionals in the room. So really just empowering them. And that culture of empowerment, it's just been, I think, throughout those settings, which is just, it's so nice, even here and have that time to reflect on in the space. Now back to you.

Thank you both, and it's just really helpful to hear not only about the power of the practice itself, but what you did as a school setting to ensure that that practice was supported and continued to be kept it to that initial standard, following the training, I guess, also, what's really lovely to hear, is the kind of ripple effect of what it means for those children and families to feel that their voice is heard. So how does that help build their relationships with you, so that when challenging times or difficult conversations happen in the future, you know, you've got that good relationship and trust with both the child and family. So that's fantastic. I'm going to attempt to share my screen again. Let's see where we're at. Okay, so we've talked about the buddy. I'm going to move on now I'm conscious of time. So I'll try and speed up a wee bit. But the second strand was really thinking about strengthening the person, GIRFEC practice, and really attended to not just it being down to the individual practitioner. But what did the system need to do to ensure that that practitioner felt confident and competent in their role? We began by thinking back to our discussion about that implementation gap. We know that one of the challenges when we think about why we don't see a practice change on the ground is often that innovations or practices aren't defined well enough, so that we can practitioners know how to deliver that practice to achieve the outcomes they desire. So our first step was to really think about how do we make GIRFEC, practice teachable, learnable doable, and assessable in practice, so that we can begin to coach to that practice. And we met

regularly with health practitioners, education practitioners, social work, really beginning to help us think what sits underneath high quality GIRFEC practice. And we began by thinking about the foundation stones. So those values and principles. And here we did a cross walk with all of the GIRFEC guidance documents, but also documents that felt absolutely relevant at the time, if we're really thinking about positioning GIRFEC practice, as a key lever to ensuring that low level concerns are met, so that families don't escalate into child protection or other services then we needed to make sure that we were clear about what the values and principles were. So you'll see here a list of values and principles. And these will be familiar to you, in that we've heard a lot about trauma informed practice over this learning series. We've heard a lot about the importance of relationship based practice. We've heard a lot about unconditional positive regard. So the need so to think about the way we talk and work with families, the stigma that can be felt by acutely by families in some really difficult and challenging conversations. We know that we need to be outcomes focused and this is back to that idea of the referral culture. We're not looking for an output we need to think not just where do we go? How do we refer this child and family on but what happens at the end of that referral? What does outcome for that child and family look like. And we know it needs to be person centred. So we're really thinking about the individual needs of that child and their family. So the values and principles are helpful because they help any practitioner walking into an engagement with the child and family to have and to hold those kind of building blocks in mind. But they don't really go far enough. So we knew that we were going to have to get a little bit clearer about what we meant by high quality GIRFEC practice. And again, we worked closely with health practitioners education, and sat down and spent time thinking through what is at the heart of good GIRFEC practice. What are those essential ingredients that mean that the policy can be translated in such a way that families will achieve the outcomes that we desire, and they desire, more importantly. So we came up with seven core components. The first building a warm worker, partnership with child and family, again, back to relationships. To offer emotional support by listening to understand -thinking, what it's like to live in that person's shoes, how would you step into those conversations without being judgmental? Maintaining an overview of the child's wellbeing, so how would we have that do that holistic analysis and ongoing thinking about what else, who else in that family can support the child or around that family can support the child?

We know we need to think about the use of the national practice tools and in component D there, we know that if we're really going to think about responding to low level concerns and neglect, we know that we need to be coordinated in our response. And we need to plan together. And that's not just about practitioners or professionals planning together, it's about planning with the family in an intentional and respectful way. And then finally, we need to enable children and families to make changes and support transitions to other services. So back to this idea that a referral on isn't going to take us far enough. So they were our core and essential ingredients of high quality GIRFEC practice. But again, we knew that we needed to take it a step further, we needed to get really clear about what practitioners should be saying and doing when they are delivering GIRFEC practice as intended. So as part of the practice profile, each of those seven core components was broken down into a number of items that described ideal practice, developmental practice, and unacceptable practice. And perhaps most importantly, although this tool can help support self-evaluation as a practitioner, is absolutely designed to form the basis of a coaching model. So here, you're working with a peer, or you're working with a supervisor, who is skilled in that practice, and setting out individual goals and targets to improve practice, being able to have that reflective space, talking honestly and openly, as Nick and Aaron have already talked about today, about where somebody might have challenges, what the training needs might be, and making sure that those things come into place. And that support is in place for that practitioner to make those changes to their practice. So I'm going to stop there. And I'm going to ask Nick and Aaron, to help us think about what it's been like to think about GIRFEC as a tool to respond to those early and initial concerns.

We felt quite good at our school and thought that we had sort of tight systems in place, you know, every August, we had the child protection briefing, and you go through the protocols of everything. So we thought, yeah, that was really good. But what I would say is, don't take things for granted. One of the best things we did actually was having the CELCIS team come in to deliver a CLPL opportunity for the whole staff around neglect and spotting neglect. And that was really interesting for myself and the deputy head teacher to watch and listen to what was going so we were observing that happening. So it formed part of our self-evaluation actually, the staff definitely knew what neglect was they could spot the signs, they were reporting it, but not everybody was knowing exactly what to do next, about things. So, we revisited all the protocols for staff and make sure that we do that. So part of our induction when you come to work at Camperdown is we have our cause for concern form, we talked over that, but what you would do, how you fill and where it goes, if it's something quite important to make sure it's handed to somebody not just left on a table if we're not in a room, etc. So it's always revising over protocols and systems that we have in place. I used to do a morning shout every morning before COVID times as well. So I was able to sort of say to staff, you know, we've got concerns here, just very briefly, just look out for this person, or, you know, there's a wee worry about there, there's been a police concern, I had to change that tact a little bit, because I wasn't having staff meetings in the morning to be able to do that. So thought of different systems to do that, just by chatting to people or emailing them. So we are constantly talking about that we just actually carried out self-evaluation at the last in-service they there. And we were looking at safeguarding, so we're always coming back and looking at the procedures that we have in place. So for us, having the tools within Dundee City Council about GIRFEC is really driving this change for us, which has been great. We're using the early concerns mapping, the observation tool, best practice model for coaching, and so forth. And my next step is going away to support two other schools. So I can see me using all of these tools to support a school as we move forward. The early concerns map really helped myself in the deputy in the beginning, we had lots of chats about, you know, what was coming in, what can we do next? We were having these chats informally. But then we started to have a more formal procedure about that and that allowed us just to tie that up. COVID changed our practice a little bit. And we now have more sort of formal meetings, we call them pastoral meetings that we have now. And we formed a wellbeing tracker that sits along that so we don't use the early concerns mapping so much now, we do it every so often just to touch base. But we have a wellbeing tracker that takes our heading. And so we've got our team around the child, our care experience children, any police concerns that come in, anybody going to the children's reporter and our young carers. And under those headings, we as a team talk around what my experience at team around the child's been, so even though I might not be the person chairing a team around the child meeting, I'd like to think I could step in for somebody else if need be because we continue to have these chats as a team. So as a leader in Dundee, I feel really good about being part of the change process. And I felt I was very listened to. And I know that our work has really helped inform the practice and change and the way things are done in Dundee City Council. And the biggest thing for us was changing to a one page plan that we create with the children and family at the time, and they get it right at the time of the meeting. So this was brave. And it was a brand new way of working. You know, when you're talking about doing minute-less meetings, people sort of gasp to begin with. So for us, it's about having smart targets which really allow you to see the progress happening, making families feel supported, and that they are achieving and holding the child at the centre of the plan. I'm not going to lie, there's times that I can still feel quite frustrated, because we're not all working the same way. But I'm going to add the word yet. And this is where the practice profile will really support and remove variations for families, and they should begin to see a more consistent approach regardless of who's chairing a team around the child. And the other frustration for me is I guess, still availability of services. You know, we're talking about getting it right. And sometimes that can be quite difficult, still not at Social Work level. But beyond universal. The FORT system that was introduced for us was really, really helpful, we can make referrals in and it's a triage system to the

right service. But as you can imagine, some services have waiting lists as long as your arm. So that's obviously something that we're still looking at. And it's about building our capacity across Dundee. So for me, there's still a lot of reflections, there's still work to be done. I'm really excited still to be part of this. And I'm really looking forward to the journey now of supporting two other schools and see how they go. And that's just not me that we'll be doing that the support staff within the school will also be part of that support journey as well. And we'll look at them training up and building that capacity. So exciting times.

Thanks so much, Nick, and you helpfully lead us into a session we're going to talk a little bit around the team around the child meeting next. And Aaron I wondered whether having Nick help us think about what it's like to use GIRFEC from a leadership perspective, and wondering whether you could also help us think about the, I know that you've used the practice profile quite closely with multi agencies with Health Visiting, and with the role of Ed Psychs, and I'm wondering whether you could talk to us, as well, a little bit more from a practice point of view, what it's been like to use that profile?

Well I think that's a good thing to talk about, really. I've used it quite a bit last year, I really looked at it really in depth. But what I would like to say it's just, it's nothing really, you know, it's not that it's everything new, it's nothing new, I think it does link really very, very well with GIRFEC. And it's allows you to focus on certain little aspects of your practice. And you can use it really, really smartly. So you can say, Okay, I want to focus maybe on the assessment, you know, and then you could have that as like your focus. And so I used our educational psychologist who was at a lot of our team around the child's anyway. So she would come to the meeting, and she would observe, you know, take part in the meeting, and then after we would set aside time, and I think that's really important, to set aside that time, and valuing your time to reflect against that practice profile, that's really made the difference, it can't just be a document that sits in a cupboard. And that's why it's so accessible. It's a document you can pick up, you can look at one little aspect of it, and you can say, okay, yeah, what a look at that practice, that was really, really good. That's something I want to work on next time. So we looked at that together. And a lot of times, I wasn't the most confident in my practice. And I thought, what could we do better? Was that really good enough? Because sometimes I'm quite hard on myself. And what we did, Denise, our educational psychologists, videotaped. We did a video answer reflective practice with permission of the parents and the children, obviously. And we videotaped me, just me, and my practice in the meeting. So we can look back at that and actually highlight and come from a strength base to say, Okay, this is what was really good. And this is what we can move forward on. And we also looked at the observation tool, and using that collaboratively with health visitors. So when sometimes a health visitor would lead a meeting, I would give them the feedback, using the toolkit, or vice versa, whenever if I were leading the meeting, they would give me the feedback. But again, it was about setting that time aside to reflect together. But what that meant is the relationships grew, we became closer. And all the work that we were going to do in the future together was actually more effective. So there was kind of a win-win, you know, all we were working to the same sort of profile. So that was linking very closely with GIRFEC, which I think was very relevant, essential in this. And at the same time, also building those relationships. So the work we were going to do is as much better.

Thank you so much for that for the feedback there. And Nick, thank you for that overview and thinking how you've been able to support that work strategically too. I'm going to move on, I'm really conscious of time, but I just wanted to share one last tool with you that we had developed and Aaron has talked about it a little bit there, which was the observation checklist for team around the child meetings. And this is really helping those who are chairing a meeting to think about how do they continue to disrupt the balance of power within those meetings? How do they make sure that the voice is heard? How do they create a safe space for children and families to come in and take part in

decision making about their lives. And Nick mentioned there, one of the key things that we tried to do differently, collectively tried to do differently was to think about the planning process within those meetings. So we were hearing from folks, especially from chairs, around the challenge of trying to chair the meeting, take a verbatim minute of the meeting, then be able to go away, tidy that up, make a professional plan and get it back to families as soon as possible. And it just felt like an overload and the focus was taken away from the actual family, and rather the focus is on the paperwork. So Nick, very courageously stepped forth and was our first person to try out a different way of running a meeting. And that was to try and just do the action planning in real time. And to use a whiteboard or to use a flip chart, and ensure that the family were absolutely engaged in that decision making process that they understood what was happening in the meeting, they understood next steps for everybody involved, and they were able to walk away with something concrete from that actual meeting. We also wanted to make sure another tool that we developed was the team around the child parent questionnaire. And this was to try and help ensure that any parents who'd experienced the team around the child meeting, we could get some honest feedback around how they experienced it and you can see questions around how comfortable and welcome did you feel at the start of the meeting, was the meeting explained? During the meeting, what supports are available to you?

So, Nick, I think I pre-empted this question in the last round. So apologies that I asked you that question for the last session. And we've had heard some great reflections from you. So just wanted to apologise, I think I took us out of sequence a wee bit there. If there's anything you'd like to add in terms what it's been like to work in this, this process as a whole. And also to open it up to you, Aaron really beginning to think about as we're trying to understand GIRFEC as that key tool for noticing those low level concerns, what it means to engage in Child and Family voice in a meaningful way, and what it means to support practitioners in a different way. So I'm just going to throw the floor open to you guys for any last thoughts or comments.

I think the biggest part for me is, even though we've been on this journey for quite some time, we are always still learning and reflecting. And I think that's really important. I've had a couple of changes in SLT, nothing to do with you, I have to say, somebody having babies. And I had two Acting Depute heads that came in various times. So again, very able practitioners, you know, had had team around the child meetings before, but working in a slightly different way from what we were doing under the CELCIS team. So that sort of coaching and modelling is really important that you still continue to do that. And you don't want to become complacent in what you do. So I think it's always really important to reflect back because there's little things that you maybe just forget from the observation sheet, or, you know, the good practice toolkit. So it's really, really important to take time together. And throughout this whole process, Aaron and Laura, who was the deputy at the time, and myself, are three very different people who do things very differently at times. So we had to take time together, to moderate each other. So what we were writing on plans, you know, was it similar, what we were writing on our Mosaic System, which is an online system that we have here in Dundee, where we record everything. So we then also worked with our educational psychologist within that, because there's still a level of assessment that needs to be recorded. So we wanted to make sure that we were doing that. So we had to do a bit of moderation amongst ourselves. And we still continue to have these chats all the time, especially as teams change. That's something to always consider.

I think for me, it's probably just to touch on the plan just quickly. I think for Emma said it really nicely. But it's you know, whatever, we're at a meeting now we're genuinely writing a plan together. And that's why the parents' voice is so clear that family's voice and child's voice is so clear, because it's not written afterwards. It's not a 15/16 page document. It's often very short one or two pages,

because we need to think about the parents' working memory, what's actually going to be meaningful, what's going to help. But because of that it's also solution focused. So the first thing is the desired outcome. It's not about you know, what you did wrong, what could have gone better? What needs to happen? It's about what would you like to happen? And it's writing that together. And I think that's why it's so powerful. It's moving away from going away typing it up, all you have to put them in it and send it you know, two days later, please read over the minute sign that if you agree with it, to something that's much more meaningful, and much more accessible to families and children. And because it's meaningful, because it's accessible, because we're actually listening, things are actually happening, I think when you think about that discussion around, you know, enhancing wellbeing, addressing neglect in Dundee, if we're going address neglect, you know, we need to think about these early concerns. And really, what are we doing about those? I think because of this work, you can see that actions are happening a little bit earlier. So maybe some things that could have gone much further, were actually being helped. Does that discussion of how early can we get involved to really make that difference? I think this approach really helps it.

And also being brave as well, just when you're writing a plan. You don't have to have each and every indicator covered in the plan, I think is something that we moved away from as well. So that for us made targets that were much more meaningful, and writing them in accessible language. I always ask the children and the families, you know, how would you like me to work this, and then we read it out. Does that sound okay? Do we understand this, everybody agreeing with that, so it's not in the language that they don't understand. And then when we go back to the next meeting, that plan is up. I use my interactive whiteboards if I'm lucky enough to be in a room that has one and pop it up. And so after we've heard the child's voice, we then know that we're going back to the view the targets that we had the last time and that forms a conversation and I have a blank plan ready to go. So for me, rather than sitting writing down everybody what they were writing, you get a feel from the conversation when you're talking through an action. And you think, Well, yeah, that's been met or it's not, and there's a wee bit more work to come, or I can hear that something's still not quite right. I then summarise that to the families and think, right, from our discussions today, then I think there's a few areas that we still need to work on. And we're able to move. So the different targets are not the same targets been carried on for months and months and months. And then the family are just thinking, Gosh, I'm never achieving this or we feel as a school, we're not achieving it, or the child's not getting the outcome that they need. So that that's been great. And a lot of that is just, you know, there'll be loads of people out there thinking well, we do all of this already. Yeah, you will do you will be doing it because we were doing some of it. But it was just putting a real lens and focus on the work that we were doing, and changing the part. But the biggest thing for me was definitely the child's voice. And getting that on the table first and changing the tone of meetings.

Thank you so much. Both you absolutely bring those meetings to life and really help us. What sounds like such a small change, as you say Nick, folks are probably doing some of this stuff already. But really being intentional in the timing and the sequencing of when that their voice is heard. So thank you again. I have one more slide, Colin, if I have time to do that, or do you want to wrap up?

One more slide? Is that okay?

No problem. Yeah, perfect.

Maybe maybe one and a half. Okay. Just to give an update really on where we are, we just wanted to share that obviously, through this work. We've been trying to create space for local authorities, for a change of pace, and to really think about how do we take a whole system's approach to neglect. We've been building capacity within Dundee to support that complex change approach. So they have a fabulous Implementation Team though now. We've been working with multi agency leadership,

which is absolutely crucial to create permissions to work differently across Health and Children's Services. I believe we have an in depth understanding of really what it takes to deliver confident and competent GIRFEC on person practice. We now have some clearly defined GIRFEC practice tools to ensure high quality practice. We're aligning this work to the current policy landscape, for example, the Prevention Agenda. And we're sharing our learning in an ongoing conversations with the Scottish Government colleagues who are leading the work to refresh GIRFEC and also who are thinking about next steps and child protection on national guidance. So I know we've run over a time, apologies to everybody there. I'm going to stop sharing.

That was really excellent. And it was a great discussion as well to have, having colleagues from Dundee join in that and let them show how it works in practice. So we've probably get time for a couple questions. There have been a few questions, so over to yourself, Colin, if you want to take the questions or any observations from yourself.

Absolutely no, no problem about over-running. It was so fascinating, and really heartening to hear. Again, my thanks to Emma, Nick and Aaron for sharing that. As Joe said, we've got a few questions in, though obviously time constrains us. So we can go 5-10 minutes over I understand. I'm going to pull two questions together about implementation, and one is, I think we know the answer already. Is this model of training been rolled out in all educational establishments in Scotland as sometimes there is a feeling that where there is neglect it is a social work issue? Well, I think we know the answer. It isn't. And then the question I'll link to that is where would an area of school start to make these changes if they don't have CELCIS to provide the support? So I guess if you add all these questions together, it's how can we take this research, this implementation practice, and how can we then roll it out wider?

These are good questions, Colin, and I'll get Nick and Aaron to help with some of this. We know what the evidence tells us in terms of needing to make sure that if we're looking for a practice change on the ground, it can't be down to that individual practitioner to have to make those changes themselves. So for any education setting hoping to make these changes, there needs to be an investment. And Nick and Aaron have already spoken about the time they've given to colleagues, their own input and leadership in creating a culture of learning and trial and error. So we know that anybody could take these tools on, but it's creating the right infrastructure that sits underneath this practice, or else we'll know that that practice could take place and it could change, but it won't be sustained. Or we know that it will continue to be delivered inconsistently. Nick and Aaron, do you have any advice for folks who were wanting to start to make some of these changes?

Yeah, I think for us, the, the biggest thing I could say is it was really about just having that permission to try something a bit differently. Now, I know I can only speak for Dundee, but the practice toolkit has been given out as a standard for us. So hopefully, that will bring us all in line. So I don't know, it's been delivered across Tayside as a document that we should be using. So I guess for us, we've always said for quite some time that we would be happy... It's having somebody that's been through, I suppose that you could link into to be able to share, practice bounce some ideas from. So this is where we're at in Dundee now starting to roll this out across other schools. But we've also said, not just schools, it would be really good for us to link up with the social work department, for instance, and share practice that way as well for that interagency working. So again, it is, again, down to vision, and having the permissions of what you want to do. But for me, as a leader of a school, introducing the buddy system, would be quite easy to do, if you had the right sort of training there for your buddies first, you can't just expect them to do something in a role like that without having a bit of training around that. But once you have that there, that's something I think you could implement. I don't know if you agree with that, Aaron?

I think yeah, definitely, and it's something you know, to me that, you can adjust for your own, that it might be nice to see how long term people do take on this, thing and, and maybe find different approaches for the buddy system and find something new, more exciting that could you know, really even push that further. So I'd be really interested to hear other people that are interested to try similar approaches and maybe different ones, and learn from those to improve our own practice. That would be that'd be great to see.

Yeah, I think in the introduction, there Emma talked about the whole system's approach. And certainly having conducted a couple of case learning reviews, which is systems theory based, then that that's coming through as absolutely essential, especially around GIRFEC implementation, and the name person in particular. And I guess one commitment we can make from this meeting as chair of the child neglect subgroup is, is to put Emma on the spot again, and to arrange for, for the kind of summary of this to be presented to the national chairs meeting so that all chairs of Child Protection Committees in Scotland can hear about this and can then go back and hopefully promote it in their own area. Because we did talk about the strategic approach. And I'm sure above what Nick has been talking about leadership there was a strategic context, within Dundee City. So it's really important that we get this working with talk about structural, strategic and practice level. And I'd like to go on, now to a practice question which has come from a social worker in Aberdeen City, and it's directed at Nicky and Aaron. And again, it's something that's come up in case reviews and other aspects of worker I've looked at, and it's Have there been situations where physical emotional neglect has been hard to detect due to concealment. And that's something that has been exercising us as a subgroup as well. How do we start to address these concealed issues?

Yeah, absolutely. So I would totally agree with that. It can be hard, you don't know what you don't know. And that can be really, really difficult. What's been helpful for us is that role of the buddy, sometimes they get little glimpse of information, and that will come from there. Our school and family development worker, you know, actually, the check ins, the wellbeing check ins that we did through COVID lockdown times, were totally invaluable. And that's where we probably gathered more information than we've had before on families and families that were perhaps not on our radar at those times, so, for me, it's not necessarily conversations people would have with me as Head Teacher perhaps is it's knowing the right people within the team and who they feel comfortable with. So again, for me that went down to the relationships but I'm sure there's a whole load of neglect parts that we've still not spotted, but looking at the early concerns mapping was a good tool to start looking at about the names that were cropping up, families that were cropping up and it made you sort of stop and really think Hang on, wait a minute, that was this week, and last week that they appeared on my sheet. So what's going on here? But just having that written down, sometimes that information is in people's heads. But then having that information written down and having, you know, specific chats about that. So I hope that's answered that question a little bit.

And I don't know if it's worth just explaining, we didn't. The early concerns mapping form didn't make the cut for this presentation, just because we had so much to try and include, but this is another tool that we developed in partnership with Dundee and this was us really trying to think about on a school level, how many different concerns folks were dealing with? And where did they go with those concerns? So we created a tool to help folks really think about what were they seeing on a regular basis? How are they understanding those concerns, and it wasn't just about counting the concerns in the school, it then provided an opportunity for the team to come together and reflect on what they were seeing. But also to do that analysis of how did one person perceive that concern was it just felt that it would be dealt with easily? Or they did someone else feel like actually, there was more going on underneath that? So it was a really helpful tool for I think, hopefully, for folks to be able to do that almost case discussion of where to go? And what is our threshold as a

school for actually thinking that we need to do more? Or this is just standard? This is what we see all the time, almost like this is the wallpaper here.

Okay, I'll kind of wind up with this question. Because it's also a positive comment, which is fantastic to hear firsthand about the engagement and creativity of education staff to adopt new practice approaches and learning. I wonder how other agencies involved in the team around the child meetings responded. And I think Nick mentioned some engagement with social work. So I can have a wider view of how, for example, Social Work, Health, et cetera, engage with this, it seems to be led by and driven by education staff, but it'd be good to hear the wider perspective on the team around the child.

When it comes to earlier, just not education, it's also health. Health has been very much involved in this process from the beginning. So I mean, they could probably talk just as much as me about the change in approach to the meeting. It's just I think, for the buddy work, sometimes it's easier because we see the children every day, but health visitors that have not been involved with the work that have come to Hillview to come the team around the child, fed back positively about it and other focus groups of education, because there's also right now a focus group with education health visitors with and they've kind of been looking at similar things - not so much team around the child, but that's come out. I think a lot of health visitors do say, Oh, I really like working that way. It makes more sense. It's more focused. And then I always offer, okay, if you want to try it this way, let's see what you think. And then they sometimes take that on board, and they like to try the same way. So they come into the lead the next meeting or lead one meeting. And, yeah, the feedback has been really positive.

I suppose from my point of view, children that have maybe open at Social Work level, we still have buddies for them. So I think that's been a new part of it, that when we go to meetings, that the buddies will be there, or the children. I kind of felt that sometimes the children weren't asked to go to a meeting, sometimes. So you know, taking the buddies along, has changed that. But yeah, I would say it's been met positively. Absolutely. And I think people are interested and want to know what we've done, and want to take on board and try bits and pieces. So I definitely think we've got a bit of work to do. But we do have a social work building attached to our school. It's not run by us or anything, but we've got that there. So it would be nice to sort of make links, and we've offered that support as well to see where that goes.

Can I just add and pick up on Aaron's point as well that for the purpose of this presentation, we have focused on the education and the work began in primary and nursery settings but in parallel, we have been working really closely with NHS Tayside, and we've had magnificent buy in from both team leads from managers from across NHS Tayside, but also more particularly with a team in the east. So we meet with team leads monthly, and with that team in the east and what we're doing now working very closely with that that group is testing out the practice profile in a health setting. So what does it mean to host or to try and facilitate the team around the child meeting? In a home? What does it mean to try and capture voice in infancy? So we're having to continue to learn what it means to apply these tools in a different setting.

Okay, excellent. Well, as I said, that was the last question. I can see sighs of relief all around. I would just like to thank again, Emma, Nick and Aaron for that. Often we use the word inspiring too loosely, but that certainly was inspiring. And as I said, it's incumbent upon us all to make sure that this learning is disseminated. We will do a bit through Child Protection Committee, Scotland to make sure that our chairs hear about this, and that it is broadcast through our network. So thank you, once again, and thank you all for attending. And I would ask you to fill in your evaluation forms because we do learn from them, we do consider them. And it has an impact on how we arrange these

learning development sessions. So thank you all. Have a good day. And I'll see you again next time round. Hopefully. Thank you. Bye. Just know. Bye.

Thanks. Thank you.

Thank you for having us. Thank you. Bye. Thanks. Bye. Thank you.