Reporting Officer:	Janice Brown
Subject:	Practitioner Forum events March 2013
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* Item for	Discussion
* Restricted Access	No

1. Introduction

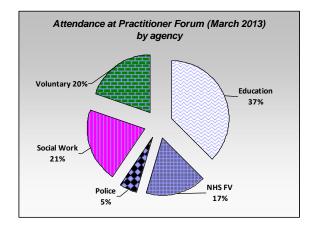
Four Practitioners' Forum events took place during March 2013. Building on the last round of Forum events, the theme for the March events focussed on the learning from the Dr Sharon Vincent's recently published research into Significant Case Reviews conducted by Child Protection Committees in Scotland. Highlighting the impact on the cumulative effect of key risk factors (Parental Substance Misuse, Domestic Abuse and Parental Mental Health), the research provided the basis for multi-agency discussions and debate into our joint working practices locally within Falkirk.

This report provides an overview of the events and highlights the key messages as identified by practitioners.

2. Attendance

The events continue to be well attended with a total of 102 staff participating in the events over the four sessions.

Chart 1 provides a breakdown of attendance by agency.



3. Learning and practice change

Throughout the presentation and during group discussions, participants were reminded that many areas of good practice and joint working had been captured in the research and participants recognised these themes within their current practices. However, much of the discussion focussed on the more criticised areas of practice within the research and groups were asked to debate these key learning points (Appendix 1). In doing so, groups were asked to consider four questions:

- Things to keep doing
- Things to stop doing
- Things to start doing
- What we are currently doing well (good practice)

Table 1 below provides some of the examples of learning/discussion:			
KEEP DOING	STOP DOING		
 Multi-agency training Multi-agency meetings – MAGs, TAC, CP Multi-agency working – on the right track but we need to keep working at it. IAF paperwork Having informal discussions with colleagues from other agencies Sharing information 	 Being diverted by parent's needs/issues Confusing chronologies with record keeping Discharging children/parents from services for non-attendance at appointments Accepting low grade thresholds Being descriptive in assessment 		
START DOING	GOOD PRACTICE		
 Increase focus on attachment and resilience Be more analytical in assessments Be more open/honest with parents – challenge more, particularly in relation to non-engagement Re-visit long term neglect cases – think more about the cumulative effect Think about how adult services become engaged with GIRFEC Be more creative in how we capture children's views – also to record this more fully Shadowing colleagues in other agencies to better understand their role. 	 Common language of GIRFEC used by staff across services – becoming more the 'norm' Early intervention approaches – MAGs, TAC VPR developments Culture of joint visits by staff from different services 		

Table 2: Key messages to the CPC

When asked '*what are the key messages that you would like to communicate to the CPC*', practitioners told us:

- Overall, the MAGs were viewed positively although there was recognition that there was variation in how these operated across localities. There was a view that MAGs were helping to develop shared understanding of roles and responsibilities across agencies/professional groups and some staff felt that they were developing a better understanding of social work thresholds for intervention.
- There is a need for ongoing multi-agency training, particularly around assessment of risk. There was recognition of the need to improve the way we use chronologies and become more confident in using the resilience matrix. There was acknowledgement of the value of training but also the difficulties in balancing this with time away from front line work and other commitments.
- There was general agreement that the IAF paperwork was useful however was felt to be time consuming to complete. There was a view that this needed to be used more consistently by all agencies.
- There was a general view that there is a need to strengthen working practices (including information sharing) between child and adult services, in particular adult mental health and addictions services.
- The need for routine child protection supervision for key groups of staff, in particular health visitors was raised. Comments included " really good when you get it but not always available at the time you need it".

4. Evaluations

Overall, the four sessions were evaluated positively, being described by most participants as being relevant to practice, interesting and informative. Participants reported that the greatest value of the sessions was the opportunity to discuss practice issues with colleagues from other agencies, and the relaxed approach which helped to facilitate discussion.

Participants also commented that they valued receiving feedback from the CPC on the issues that had been raised at the previous Forum.

When asked to consider what changes practitioners would make to their practice following attendance at the Forum, responses included:

- "think more carefully about how we use chronologies"; "need time to complete chronologies", " need to be analysing chronologies more with other agencies and not in isolation"
- "...we need to be more curious and challenge parents about their behaviours....", "
- "I will ensure that I record the child's views throughout the assessment process" (this comment came from a practitioner who described how she sought children's views but acknowledged that these were not always recorded)

5. Conclusion

Participants gave a clear indication that they value the opportunity to hear about current research in child protection and reflect on their own local joint working practices. The locality approach to the events is viewed as a positive way for groups of staff who work together to debate in an informal environment key practice issues.

Whilst many areas of good practice were identified by participants, a number of themes emerged which may be worthy of further discussion by CPC (see Table 2).

Appendix 1

Agency Themes (good practice identified in the research)

- Practice issues rarely had an impact on the child's death or the harm the child experienced.
- Procedures were generally followed.
- Recording processes were often noted to be of a high standard.
- Much good practice was identified in relation to communication and information sharing between and across the agencies.
- Professionals were often praised for attempting to engage with troubled families in the context of extremely difficult circumstances and sometimes despite outright hostility.

Agency Themes (critical factors identified in the research)

- Too much focus on the needs of parents as opposed to the welfare of the child; tendency to believe parents explanations; reluctance to challenge; over optimism about parents capacity to change; children not seen or listened to and warning signs missed.
- Confusion over status of referral, not viewed as child protection; children considered to be in need rather than at risk especially in long term neglect cases; escalating risks not recognised.
- Little recognition of escalation of risk factors recognised in assessment, and the impact of parental substance misuse or domestic abuse not explored.
- Confusion over roles and responsibilities; over reliance on social work.
- Feelings of professional powerlessness.