



Fife Child Protection Committee Improvement Plan 2017 -2020



Contents

Preface by Chief Officers	3
Foreword on behalf of the Fife Child Protection Committee	4
A review of child protection in Fife: 2014-17	5
Further improving Child Protection in Fife: 2017-20	7
<i>Ensuring that child protection is a priority for all staff</i>	7
<i>Delivering further improvements in child protection</i>	9

Preface by Chief Officers

The Fife Chief Officers Public Safety Group is pleased to endorse Fife Child Protection Committee's Improvement Plan and priorities for 2017 - 2020 which reflects our direction to the CPC and our views based on the available various briefings and formal reports present to us.


Fife was subject to a Joint Inspection of Children's Services, led by the Care Inspectorate in August 2015. The findings of this inspection published in 2016 were very positive, demonstrating our continued commitment, enthusiasm and dedication in protecting children and improving outcomes for them.

A copy of the full report can be downloaded by visiting:

<http://www.careinspectorate.com/images/documents/3123/Fife%20childrens%20services%20joint%20inspection%20report%20March%202016.pdf>

As Chief Officers we give a continued commitment and support to the work of the Committee, but acknowledge the particular challenges facing us all within the context of an ever changing child protection landscape, increasing demands and expectations of agencies alongside current financial restraint and uncertainties.

The Chief Officer's would also like to extend our thanks to staff and managers who deliver frontline services for children and their families, and commend their professionalism, sensitivity and diligence, in meeting the demands and responsibilities facing them within the restraints highlighted.



Colin Gall
Divisional Commander
Police Scotland



Steve Grimmond
Chief Executive
Fife Council



Paul Hawkins
Chief Executive
NHS Fife

Foreword on behalf of the Fife Child Protection Committee

As Independent Chair of Fife Child Protection Committee I am pleased on behalf of the Committee to present our Improvement Plan 2017–2020. The plan is based on desired outcomes from our 6 priority themes. We seek to achieve better preventative and protective measures for vulnerable children and better outcomes for those we aim to protect in the future. In support of its successful delivery we aim to continue to capture increasing levels of information on the outcomes being achieved for our most vulnerable children. The proposed measurement of these outcomes has been carefully considered and demonstrates the application of *SMART criteria*:

- **Specific** – target a specific area for improvement
- **Measurable** – quantify or at least suggest an indicator of progress.
- **Achievable** – be able to specify who will do it.
- **Realistic** – state what results can realistically be achieved, with available resources
- **Time-limited** — specify when the result(s) can be achieved.

The Fife Child Protection Committee’s Improvement Plan 2014 to 2016 has been positively evaluated and the results show that we have delivered to expectation. That plan had a focus on building appropriate structures in terms of self -evaluation and continuous improvement, early and effective intervention and the impact of Child Sexual Exploitation. This has provided the foundation and maturity that was necessary to enable the CPC to move forward to a position where we can be more ambitious and confident that with the appropriate evaluation structures in place we can identify and measure improvement.



Independent Chair
Fife Child Protection Committee



Fife Child Protection Committee

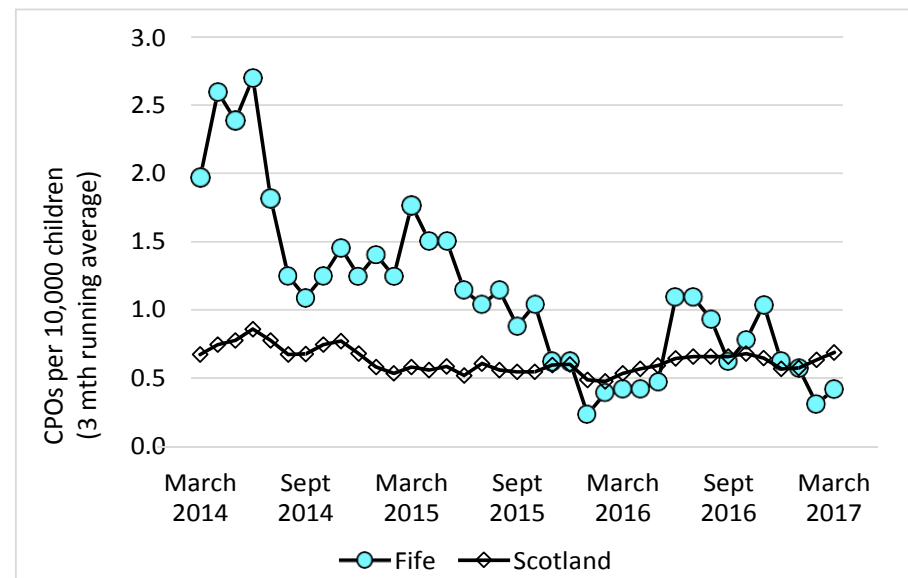
A review of child protection in Fife: 2014-17

The Fife Child Protection Committee (CPC) provides leadership for child protection in Fife and its further improvement. It is supported in this task by the Fife Children's Services Partnership. Strategic oversight of both child protection and children's services, more widely, is provided by the Children in Fife Partnership Group.

Self-evaluation is central to the work of both the Child Protection Committee and the Fife Children's Services Partnership, and joint arrangements for the audit and self-evaluation of child protection and children's services are in place. This joint working provides a strong basis for improvement. A Joint Inspection of Children's Services in Fife, led by the Care Inspectorate in August 2015, provided a very positive reflection on this approach and recognised its success in helping to improve outcomes and life chances for vulnerable children and young people in Fife.

The Children Services Partnership has increasingly adopted a preventative, strategic approach. This is reflected in:

- The development of the Family Nurture Approach, which supports better collaborative working with families and communities.
- The adoption by partners of strategies that support greater intervention with families at an early stage (e.g. Fife Council's Children and Families Strategy, which has ensured an increasing capacity for preventative working by social work fieldwork teams).
- An increasing awareness amongst staff across the partnership of the critical nature of child protection.



*Trend in the number of Child Protection Orders per 10,000 children
Data is shown for Fife and Scotland over the period 2014-17.*

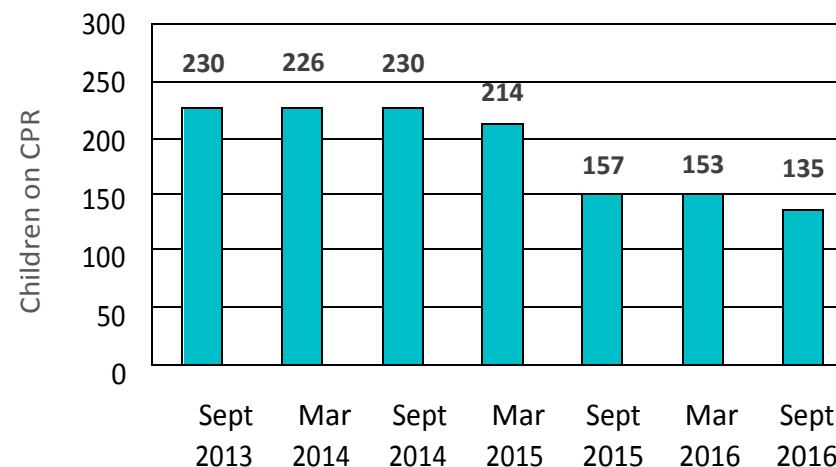
Underpinning this more preventative, strategic approach has been a range of improvement activity relating to the processes that support vulnerable children and young people. For example:

- The increasing use of the Child Wellbeing Pathway to improve information sharing and action planning at the earliest stage of support for children, young people and their families.
- Improvement activity within the Children and Young People’s Improvement Collaborative, to improve service delivery from the bottom up.

This work to improve service delivery has been supported by an increasing focus on the outcomes of children and young people and improvements in the use of key performance data about service delivery and processes, including benchmarking.

The positive impact of these changes is evident in recent trends:

- The number of **Child Protection Orders (CPO)** has reduced significantly over the past three years, from a level that was significantly above the national rate to a level that is now broadly in line with the national rate (see the figure on page 5).
- The number of children on the **Child Protection Register (CPR)** has also decreased significantly over the past three years, falling from 230 for the half-year October-March 2013/14 to 135 for the half-year April-September 2016/17 (see the figure on this page).



Trend in the number of children on the Child Protection Register (at the period end)

Further improving child protection in Fife: 2017-20

In order to improve further the planning and delivery of services for children in Fife, the Fife Child Protection Committee and Fife Children's Services Partnership have worked together to develop a joint approach to strategic planning and reporting. This approach has led to the development of a **Children's Services Plan for 2017-20**, which provides an overview of:

- The key priorities that Fife Partnership needs to address to improve outcomes for children and young people.
- The ways in which the rights of the child will be better secured and given greater effect.
- Strategic planning for child protection in Fife over the period 2017-20.
- The actions that Fife Partnership will take to address the challenge of child poverty.

Child protection is an integral part of this joint strategic approach, and Child Protection has been identified as one of the sixteen priorities for improvement over the period 2017-20.

Ensuring that child protection is a priority for all staff

In order to recognise the varied needs of children and young people, and to reflect the contribution of different services to effective partnership working, the Children's Services Plan 2017-20 includes a summary overview of the work required to improve outcomes for each priority in the plan. Page 8 shows the overview of the Child Protection priority.

The overview identifies a range of activity that will be key to improving child protection in Fife over the period 2017-20. Much of this is focussed on universal and additional services for children and young people. This reflects an awareness that all staff have a role to play in child protection, and a recognition that further improvement in child protection across Fife relies on improving the culture within the system and the confidence and competence of staff in assessing and responding to risk.

Priority 1 Safe

Child Protection

The Fife Child Protection Committee (CPC) has the strategic lead responsibility for child protection in Fife. Its vision is for all children in Fife to be safe and protected from harm.

An objective of the Fife Children's Services Plan 2017-20 is to support the Child Protection Committee to implement its improvement plan for 2017-20 and, by so doing, to minimise the risk of harm to children in Fife.

This priority will help to protect children's rights under a range of articles within the UNCRC, including: article 19, 33-36:

- Children have a right to be protected from all forms of violence / Children have the right to be protected from all forms of exploitation

Partnership working

Universal / Additional

The needs of children are at the centre of all practice
Agency/service guidance and tools support assessment and planning that place the child at the centre.

Ensuring relationships with children, parents/carers are effective and constructive

Relevant staff are aware of the importance of a strength-based, child focused approach, through single/multi-agency training.

Assessments and planning are effective and techniques and tools are used to best effect

Partner agencies agree and implement a common chronology format and embed the use of chronologies as appropriate.

Relevant information is shared appropriately, clear lines of responsibility are understood
Clear guidelines and steps for progression to child protection intervention are embedded across all agencies.

Early and effective intervention happens where possible

Relevant staff are clear about thresholds around children.

Culture of effective management support/supervision which embodies the values and principles supported by the CPC

Common values are adopted and principles stated.

Intensive

Strengthening the critical child protection process of Initial Referral Discussion (IRD) Meetings

Creation of a performance management framework which evidences the effectiveness of the IRD process.

Evidence

Proportion of Quality Indicators assessed during annual multi agency file audit as very good or better.

Relevant staff report high levels of awareness and confidence about risk assessment and reporting.

Proportion of case files with appropriate single/multi-agency chronologies during annual single/multi-agency file audits.

Proportion of staff aware of CPC values and principles.

Improved understanding of the IRD process and its impact on the safety of children and young people.

The key outcome measure that will be used in the Children's Services Plan for this priority will be:

- Proportion of Quality Indicators assessed during annual multi agency file audit as very good or better.

A full report of progress will be made against the Child Protection Committee Improvement Plan 2017-20

Delivering further improvements in child protection

The tables that follow outline the improvement activity that will be undertaken by partners across Fife, under the leadership of the Fife Child Protection Committee, in order to ensure that child protection in Fife improves further over the coming three years.

The tables will also be used to provide a framework for monitoring progress with improvement over the period 2017-20.

Priority Outcome 1 – The needs of Children are at the centre of all practice. (QI 2.1, 2.2, 3.1)					
Objective	Actions – We will:	Lead Person/ Group	Timescale/ Target for completion	How will we know that we have succeeded?	Suggested Measures/Indicators
1. The needs of the child are prioritised, environmental and care issues identified and the impact on the child are appropriately assessed and addressed.	<ul style="list-style-type: none"> Ensure agency/service guidance and tools which support assessment & planning reference placing the child at the centre 	Single Agency Lead CPC Lead Social Work CPC Lead Education CPC Lead Health and Social Care CPC Lead Health CPC Police Scotland 3rd Sector CPC Lead (link to Children’s Services Forum)	Outcome - March 2020 Action - March 2018	<ul style="list-style-type: none"> Annual multi-agency file audit and single agency file audits evidence good or improving practice. Focus meetings feedback Analysis of responses in 2017 Staff Survey 	<ul style="list-style-type: none"> No (%) of case files assessed as very good or better No of cases identifying good practice % positive feedback % positive responses
		Multi-Agency Lead CPC Chair			

<p>2. Risks associated with over optimism are understood. Staff are confident to challenge presenting behaviour and have an understanding of unconscious bias and treat information where relevant with respectful uncertainty.</p>	<p>i) Ensure all agency/service training/awareness raising re child protection, both single & multi-agency includes awareness of the risks associated with over optimism.</p> <p>ii) Develop and distribute a 7 Minute Briefing for all operational staff.</p>	<p>Single Agency Leads CPC Lead Social Work CPC Lead Education CPC Lead Health and Social Care CPC Lead Health CPC Police Scotland 3rd Sector CPC Lead (link to Children’s Services Forum)</p>	<p>Outcome – March 2020</p> <p>Action i) – March 2018</p> <p>Action ii) – March 2018</p>	<ul style="list-style-type: none"> • Annual multi-agency file audit and single agency file audits evidence good or improving practice. • The positive impact of training is demonstrated through/within follow up training evaluations • The evaluation of the impact of the 7 Minute Briefing demonstrates awareness/understanding embedded in practice. • Focus meetings feedback • Analysis of responses in 2017 Staff Survey 	<ul style="list-style-type: none"> • No (%) of case files assessed as very good or better • No of cases identifying good practice • No (%) feedback demonstrating positive impact on practice • No of returns • % 7 Minute briefing action plans developed • % positive feedback • % positive responses
		<p>Multi-Agency Lead Chair CPC Workforce Development Group</p>			

Priority Outcome 2 – Ensuring that all relationships with children, parents/carers are effective, constructive and are central to improving wellbeing and minimising risk of harm. (Q1 2.1, 2.2, 3.1)

Objective	Actions – We will:	Lead Person/ Group	Timescale/ Target for completion	How will we know that we have succeeded?	Suggested Measures/Indicators
<p>3. Contacts with children involve direct engagement sufficient to result in a confidence that wellbeing needs are being met and risk of harm is minimised. This work will be informed by a children’s rights perspective.</p> <p>This information is recorded on appropriate systems/records.</p>	<p>i) Ensure single and multi-agency guidance reflects the importance of accurate and comprehensive case recording.</p> <p>ii) Ensure single and multi-agency guidance reflect the importance of direct engagement with children and their families.</p>	<p>Single Agency Leads CPC Lead Social Work CPC Lead Education CPC Lead Health and Social Care CPC Lead Health CPC Police Scotland 3rd Sector CPC Lead (link to Children’s Services Forum)</p> <hr/> <p>Multi-Agency Lead CPC Chair</p>	<p>Outcome - March 2020</p> <p>Action i)- March 2018</p> <p>Action ii)- March 2018</p>	<ul style="list-style-type: none"> • Annual multi-agency file audit and single agency file audits evidence good or improving practice. • Single agency guidance on recording is reinforced through management briefings and advice and positive impact is identified. • Single agency guidance on the need for direct engagement is reinforced through management briefings and advice and positive impact is identified. • A series of focus meetings is developed and the impact action assessed. 	<ul style="list-style-type: none"> • No (%) of case files assessed as very good or better • % staff received briefings (sample) • % of staff (sample) report high level awareness/confidence on reporting • % staff report positive impact

<p>4. Positive relationships with children, parents and carers using a strength based approach are encouraged.</p> <ul style="list-style-type: none"> ➤ Where parental non engagement is evident or disguised compliance is suspected staff assess the risks and act appropriately, seeking supervisory/management support when necessary. ➤ When changes to the named person or lead professional are unavoidable ensure the transition is supportive and well managed. 	<ul style="list-style-type: none"> i) Relevant staff are aware of the importance of a strength based approach through Single and Multi - Agency training ii) Guidance is available on parental non-compliance and that risk assessment tools/training includes this. iii) Relevant staff are aware of the impact on the child and family of a change of named person, lead professional or worker and consider additional support where necessary. 	<p>Single Agency Lead CPC Lead Social Work CPC Lead Education CPC Lead Health and Social Care CPC Lead Health CPC Police Scotland 3rd Sector CPC Lead (link to Children’s Services Forum)</p> <hr/> <p>Multi-Agency Lead CPC Chair Chair Workforce Development Working Group</p>	<p>Outcome – March 2020</p> <p>Action i) – March 2019</p> <p>Action ii) – March 2018</p> <p>Action iii) – March 2019</p>	<ul style="list-style-type: none"> • Annual multi-agency file audit and single agency file audits evidence good or improving practice. • A series of focus meetings is developed and the impact of each action assessed. • Analysis of responses in 2017 Staff Survey 	<ul style="list-style-type: none"> • No (%) of case files assessed as very good or better • % of staff (survey) report high or good level of -awareness/confidence in risk assessment <ul style="list-style-type: none"> - Using a strengths based approach - The impact of Named Person/Lead Professional change on a child and family
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Priority Outcome 3 – All assessments and plans are accurate and effective in achieving outcomes in meeting needs and minimising risk of harm and all available resources, techniques and tools are used to best effect. (QI 5.1, 5.2, 5.3)

Objective	Actions – We will:	Lead Person/ Group	Timescale/ Target for completion	How will we know that we have succeeded?	Suggested Measures/Indicators
<p>5. Single agency assessments are evidenced based and provide a clear analysis of areas of strengths, risk, need and concern, including accumulative concerns and the potential impact they may have on the child.</p>	<p>i) Ensure scrutiny of relevant assessments by each agency through a system of dip sampling analysis with outcomes reported annually.</p> <p>ii) Produce and disseminate multi-agency 7 minute practice briefings based on the lessons learned from the dip sampling.</p> <p>iii) Staff are aware of the need to explore parents' explanations for injuries and non-attendance at school and these are</p>	<p>Single Agency Leads CPC Lead Social Work CPC Lead Education CPC Lead Health and Social Care CPC Lead Health CPC Lead Police Scotland 3rd Sector CPC Lead (link to Children's Services Forum)</p>	<p>Outcome – March 2020</p> <p>Action i) -Dip Sampling reported to CPC Annually</p> <p>Action ii) -7 Minute Briefing by March 2019</p> <p>Action iii) - Progress</p>	<ul style="list-style-type: none"> • Annual multi-agency file audit and single agency file audits evidence good or improving practice. • A series of focus meetings is developed and the impact of each assessed. • Analysis of responses in 2017 Staff Survey • 7 minute practice briefings prepared and learning/action points 	<ul style="list-style-type: none"> • No (%) of case files assessed as very good or better (risk assessment) • No of cases identifying good practice • % of staff (sample) report high level awareness/confidence in risk assessment and reporting child protection concerns.

	considered in the context of other risk factors such as missed appointments. This should be evidenced and included in single agency assessments and recorded on systems.	Multi-Agency Lead CPC Chair	Reported to CPC Annually	from single agencies evaluated.	<ul style="list-style-type: none"> No of returns and evaluation of reach and impact.
6. The use of single and multi-agency chronologies within relevant services is standard practice. They are completed to an accepted quality and viewed as a key analytical aid in identifying needs and risks both individual and cumulative.	<ul style="list-style-type: none"> Partner agencies will agree and implement a common chronology format and promote and embed the use of chronology as an analytical tool in single and multi-agency practice. Planning for children will be supported by single and/or multi-agency chronologies. 	Single Agency Lead CPC Lead Social Work CPC Lead Education CPC Lead Health and Social Care CPC Lead Health CPC Police Scotland 3rd Sector CPC Lead (link to Children's Services Forum)	Outcome - March 2020 Action i) – March 2019 Action ii) – March 2020 Action iii) – March 2018	<ul style="list-style-type: none"> Annual multi-agency file audit and single agency file audits evidence good or improving practice. A series of focus meetings is developed and the impact of each assessed. Analysis of responses in 2017 Staff Survey. 	<ul style="list-style-type: none"> No (%) of case files assessed as very good or better (chronologies) % case files with "fit for purpose" single/multi-agency chronologies No of cases identifying good practice % of self-evaluations identifying good standard chronology

	<ul style="list-style-type: none"> • Produce single and multi-agency practice briefings on the benefits of chronologies in identifying patterns of needs and risks. 	Multi-Agency Lead Wellbeing Working Group Chair		<ul style="list-style-type: none"> • The ongoing programme of self-evaluation will include sampling single and multi-agency chronologies on a basis against an agreed quality standard. 	<ul style="list-style-type: none"> • % of staff (sample) report high level awareness/confidence in developing “fit for purpose” chronologies
<p>7. Guidance provided by the National Risk Framework is embedded in practice and appropriately used in all assessments of risk and need.</p> <p>Ensure decision making in respect of needs and risks is clearly recorded.</p>	<ul style="list-style-type: none"> • Ensure scrutiny of case records by each agency through a system of dip sampling analysis which will consider the quality of analysis of risk and need. 	Single Agency Lead CPC Lead Social Work CPC Lead Education CPC Lead Health and Social Care CPC Lead Health CPC Police Scotland 3rd Sector CPC Lead (link to Children’s Services Forum)	Outcome – March 2020 Action - reported to CPC Annually	<ul style="list-style-type: none"> • Annual multi-agency file audit and single agency file audits evidence good or improving practice. • A series of focus meetings is developed and the impact of each action assessed. • Analysis of responses in 2017 Staff Survey. 	<ul style="list-style-type: none"> • No (%) of case files assessed as very good or better (needs and risk assessments) • No of cases identifying good practice • % (sample) of case records demonstrate National Guidance embedded in practice

		Multi-Agency Lead CPC Chair		<ul style="list-style-type: none"> Evidence form dip sampling will be presented to the Self Evaluation and Audit Group. 	<ul style="list-style-type: none"> % of staff (sample) report high level awareness/confidence in applying NRF guidance or agency guidance based on NRF.
8. Assessment of need and risk consider historic and current information including information as appropriate about the wider family.	<p>i) The Children’s Services Information Sharing Protocol is updated to reflect the need to share relevant information proportionate to the needs of the child.</p> <p>ii) An escalation process will be agreed and implemented where there are disagreements as to the information made available.</p>	Single Agency Lead CPC Lead Social Work CPC Lead Education CPC Lead Health and Social Care CPC Lead Health CPC Police Scotland 3rd Sector CPC Lead (link to Children’s Services Forum)	<p>Outcome – March 2020</p> <p>Action i) – March 2018</p> <p>Action ii) – March 2018</p> <p>Action iii) – March 2018</p>	<ul style="list-style-type: none"> Escalation process evaluated and assessed (i.e. how many cases are escalated and the result is agreed). Single and multi-agency practice briefings are evaluated as positively enhancing knowledge. Case files (sample) demonstrate the use of 	<ul style="list-style-type: none"> % of cases (sample) with improved access to information No of cases escalated No resolved within a specified timescale (to be determined) % of respondents report awareness/improved knowledge

	iii) single and multi-agency practice briefings on the need to share relevant information proportionate to the needs of the child.	Multi-Agency Lead CPC Chair		appropriate information.	<ul style="list-style-type: none"> • % of positive responses • % of responses report positive impact on practice (6 month post course evaluation)
9. IRD – The IRD is part of the critical child protection process and functions effectively to safeguard children.	<p>i) Produce and deliver guidance on the IRD procedure suitable for single and multi-agency practices in Fife.</p> <p>ii) Create a performance management framework which evidences the effectiveness of the IRD process</p>	<p>Single Agency Lead CPC Lead Social Work CPC Lead Education CPC Lead Health and Social Care CPC Lead Health CPC Police Scotland 3rd Sector CPC Lead (link to Children’s Services Forum)</p> <p>Multi-Agency Lead IRD SOG Working Group Chair</p>	<p>Outcome – March 2020</p> <p>Action i) – March 2018</p> <p>Action ii) – March 2018</p> <p>Action iii) – March 2018</p>	<ul style="list-style-type: none"> • Guidance is produced and responses are evaluated as positive. • Performance management criteria is identified and reporting and review processes are embedded. • Analysis of responses in 2017 Staff Survey 	<ul style="list-style-type: none"> • % of staff (sample) report high level awareness/confidence in IRD process • Multi-agency case file audit • IRD evaluation

Priority Outcome 4 – Relevant information is shared appropriately, clear lines of responsibility for action are understood across partners and communication is effective in minimising potential risks. (QI 1.1, 5.1, 5.2, 6.1)

Objective	Actions We will:	Lead Person/ Group	Timescale	How will we know that we have succeeded?	Suggested Measures/Indicators
<p>10. Agencies are aware of the need to share relevant information. Information sharing is recorded including why it was shared, with whom and why. Decisions not to share are similarly evidenced.</p>	<ul style="list-style-type: none"> Produce suitable 'on line' training for all staff involved reinforcing the importance to share information, the use of consent and schedules 2 & 3 of the Data Protection Act 1998 and the importance of recording decision making rational. 	<p>Single Agency Lead CPC Lead Social Work CPC Lead Education CPC Lead Health and Social Care CPC Lead Health CPC Police Scotland 3rd Sector CPC Lead (link to Children's Services Forum)</p> <p>Multi-Agency Lead CPC Chair</p>	<p>Outcome – March 2020</p> <p>Action - March 2019</p>	<ul style="list-style-type: none"> A series of focus meetings is developed and the impact of each action assessed. Analysis of responses in 2017 Staff Survey Analysis of On-Line Training completion data 	<ul style="list-style-type: none"> no (%) of case files assessed as very good or better (information sharing) No of cases identifying good practice % of staff (sample) report high level awareness/confidence in information sharing % staff and partners (sample) complete Data Protection training by December 2017

<p>11. Where concerns exist about child harm which may lead to child protection interventions clear lines of responsibility for coordination of action are understood.</p>	<ul style="list-style-type: none"> • Clear guidelines on identifying risk at an early stage and implementing measures of support are embedded across all agencies. Key risk factors are highlighted and clear steps for progression to child protection intervention are produced and embedded in guidance and training: including managing transitions as appropriate. 	<p>Single Agency Lead CPC Lead Social Work CPC Lead Education CPC Lead Health and Social Care CPC Lead Health CPC Police Scotland 3rd Sector CPC Lead (link to Children’s Services Forum)</p>	<p>Outcome – March 2020</p> <p>Action - March 2018</p>	<ul style="list-style-type: none"> • Annual multi-agency file audit and single agency file audits evidence good or improving practice. • A series of focus meetings are developed and the impact of each assessed. • Analysis of responses in 2017 Staff Survey 	<ul style="list-style-type: none"> • No (%) of case files assessed as very good or better (wellbeing pathway) • No of cases identifying good practice • % of staff (sample) report high level awareness/confidence in intervening early to promote, support or safeguard a child's wellbeing.
		<p>Multi-Agency Lead CPC Chair</p>			

Priority Outcome 5 – Early and effective intervention is achieved where possible, minimising the risk of harm to Children and Young People. (QI 5.1, 5.2, 6.2)

Objective	Actions We will:	Lead Person/ Group	Timescale	How will we know that we have succeeded?	Suggested Measures/Indicators
<p>12. The relationship between GIRFEC and Child Protection and the impact of early intervention acknowledged and understood by all partners.</p>	<p>i) Ensure that relevant staff are clear about thresholds around individual children and that we embed our understanding into GIRFEC and Child Protection Training.</p> <p>ii) Develop multi-agency guidance for staff highlighting the interfaces between Child Protection, Adult Protection and GIRFEC.</p> <p>iii) Through GIRFEC and Child Protection Training and guidance ensure that professionals are aware of their responsibility to act on information as well as simply passing it on.</p>	<p>Single Agency Lead CPC Lead Social Work CPC Lead Education CPC Lead Health and Social Care CPC Lead Health CPC Police Scotland 3rd Sector CPC Lead (link to Children’s Services Forum)</p> <p>Multi-Agency Lead Actions i & iii - Workforce Development Working Group Chair</p> <p>Action ii - CPC Chair</p>	<p>Outcome – March 2020</p> <p>Action i)- March 2019</p>	<ul style="list-style-type: none"> • Annual multi-agency file audit and single agency Wellbeing pathway audits are evaluated and evidence of good or improving practice is found. • A series of focus meetings are developed and the impact of each assessed. • Analysis of responses in 2017 Staff Survey • Training programme evaluation is positive as to enhanced knowledge being achieved 	<ul style="list-style-type: none"> • No (%) of case files assessed as very good or better (wellbeing pathway) • No of cases identifying good practice • % of staff (sample) report high level awareness/confidence in early intervention • % of positive responses • % of responses report positive impact on practice (6 month post course evaluation?)

<p>13. The risks from CSE are fully understood by relevant staff in children’s and adult services and Public awareness of the risks of CSE (including amongst children and young people) is increased appropriately.</p>	<p>i) Continue with single and multi – agency CSE training and awareness raising Programme</p> <p>ii) Ongoing development of raising awareness of the risks of CSE with for Looked After children & young people</p> <p>iii) Develop and implement an awareness raising plan of activity with night time economy.</p>	<p>Single Agency Lead CPC Lead Social Work CPC Lead Education CPC Lead Health and Social Care CPC Lead Health CPC Police Scotland 3rd Sector CPC Lead (link to Children’s Services Forum)</p> <hr/> <p>Multi-Agency Lead CSE Working Group Chair</p>	<p>Outcome March 2020</p> <p>Action i & ii – Annual Reporting to CPC</p> <p>Action iii – January 2018</p>	<ul style="list-style-type: none"> • Professionals report increased knowledge & awareness of issues related to CSE • Social Work Child & Family and Criminal Justice staff, residential staff, foster carers , kinship carers and supported accommodation providers report increased knowledge and awareness of issues related to CSE • Number of awareness raising sessions held. 	<ul style="list-style-type: none"> • No of staff trained through single & multi-agency sessions • % rated training as good/very good • Data report to be developed focussing on reporting of CSE and use of specific risk assessment tools. • Number of CSE information sharing meetings held for individual children will be reported • Evaluation of activity proves positive with feedback indicating good/very good.
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Priority Outcome 6 – A culture of effective management support and/or supervision which embodies the values and principles of Fife Child Protection Committee is embedded. (QI 7.2, 9.3, 9.4)

Objective	Actions We will:	Lead Person/Group	Timescale	How will we know that we have succeeded?	Suggested measures/indicators
<p>14. Effective management and supervision processes and structures that encourage, support and constructively challenge are evidenced by all agencies.</p>	<p>i) Develop and adopt common Fife CPC values and principles statement.</p> <p>ii) Embed the principles of constructive challenge in all CPC & GIRFEC Training Programmes</p>	<p>Single Agency Lead CPC Lead Social Work CPC Lead Education CPC Lead Health and Social Care CPC Lead Health CPC Police Scotland 3rd Sector CPC Lead (link to Children’s Services Forum)</p>	<p>Outcome March 2020</p> <p>Action i - March 2018</p> <p>Action ii – January 2018</p>	<ul style="list-style-type: none"> • A series of focus meetings is developed and the impact of each assessed. • Analysis of responses in 2017 Staff Survey 	<ul style="list-style-type: none"> • % of relevant staff aware of Fife CPC values and principles • % of relevant staff who feel effectively managed and supervised.
		<p>Multi-Agency Lead Action i) CPC Chair</p> <p>Action ii) Workforce Development Working Group Chair</p>			

