

## How GIRFEC worked for Amy



The *Getting it right for every child* approach helped the family identify risks and protective factors

### **When Amy was four months old, she was showing some worrying signs that she might not be growing and developing as she should for a child of her age...**

Amy and her sister Lily lived with their mum, Karen and their gran, Rose, in a three-bedroom rented flat in south Edinburgh.

At the time, Amy was four months old, Lily was 14 months old and their mum, Karen, was 18. Karen had some mental health problems and quite a difficult past. The family suffered domestic abuse from her last partner who occasionally still tries to disrupt their lives.

Amy was showing some signs that she might not be growing and developing as she should have been for a child of her age. There were other concerns about the family, too, including their safety from Karen's ex-partner and the general standard of hygiene in the home.

The family hadn't had a positive experience with their last two health visitors and there were worries about Karen's wellbeing, as well as the future outcomes for her two girls.

### **A fresh start**

With all of this in mind, the new health visitor felt that the *Getting it right* approach might allow everyone to make a fresh start. As Named Person and Lead Professional, she saw an opportunity to work with the family in a more honest and open way.

She organised a meeting for the family and five other partners. These were the health visitor herself, a representative from a voluntary organisation, the duty social worker, a children's centre worker and someone from housing.

Karen and Rose used the meeting to tell their story. They also talked about their hopes for their and the girls' futures – and what support they needed to meet these aspirations. They used the *Getting it right* 'wellbeing wheel' to help them focus on the main issues, but not miss any other things that might be important.

All the partners agreed a child's plan for Amy – it was clearly set out and written so that the family understood what they needed to do. The health visitor said that using the *Getting it right* approach made it easier to set some measurable actions and outcomes that everyone could agree to.

Child's plan meetings were then set regularly at eight-week intervals – the family and the five partners all came to these meetings.

Six months later, there were no further concerns about Amy's development. The flat was cleaner and tidier and Karen had not had any further contact with the girls' father.

### **All the professionals came together in the same place**

The family said they liked the fact that all the professionals came together in the same place so that everyone knew exactly what was going on – it meant they only had to tell their story once. They also liked having the health visitor as their named person – they felt that she was there to support the family and challenge others on their behalf. Karen said she felt better about being a mum – and that she wasn't being criticised.

The health visitor says she found this a very satisfying way to work. "I felt this helped set the relationship with the family back on track. The tools and approach have helped Karen and her family – and me – to identify risks and protective factors for the girls."

This case study is from the Scottish Government website

<http://www.gov.scot/Topics/People/Young-People/gettingitright/resources/case-studies/amy>