Original Investigation

Getting It Right for Every Child: A National Policy Framework to Promote Children's Well-being in Scotland, United Kingdom

EMMA COLES,* HELEN CHEYNE,* JEAN RANKIN,[†]
and BRIGID DANIEL[‡]

**Nursing, Midwifery and Allied Health Professions Research Unit, University of Stirling; [†]School of Health, Nursing and Midwifery, University of the West of Scotland; [‡]School of Social Sciences, University of Stirling*

Policy Points:

- Getting It Right for Every Child (GIRFEC), a landmark policy framework for improving children's well-being in Scotland, United Kingdom, is a practice initiative signifying a distinct way of thinking, an agenda for change, and the future direction of child welfare policy.
- GIRFEC represents a unique case study of national transformative change within the contexts of children's well-being and universal services and is of relevance to other jurisdictions.
- Implementation is under way, with an understanding of well-being and the requirement for information sharing enshrined in law. Yet there is scope for interpretation within the legislation and associated guidance.
- Inherent tensions around intrusion, data gathering, professional roles, and balancing well-being against child protection threaten the effectiveness of the policy if not resolved.

Context: Despite persistent health inequalities and intergenerational deprivation, the Scottish government aspires for Scotland to be the best country for children to grow up in. Getting It Right for Every Child (GIRFEC) is a landmark children's policy framework to improve children's well-being via early intervention, universal service provision, and multiagency coordination across organizational boundaries. Placing the child and family "at the center," this approach marks a shift from welfare to well-being, yet there is still a general lack of consensus over how well-being is defined and measured. As an umbrella

policy framework with broad reach, GIRFEC represents the current and future direction of children's/family policy in Scotland, yet large-scale practice change is required for successful implementation.

Methods: This article explores the origins and emergence of GIRFEC and presents a critical analysis of its incremental design, development, and implementation.

Findings: There is considerable scope for interpretation within the GIRFEC legislation and guidance, most notably around assessment of well-being and the role and remit of those charged with implementation. Tensions have arisen around issues such as professional roles; intrusion, data sharing, and confidentiality; and the balance between supporting well-being and protecting children. Despite the policy's intentions for integration, the service landscape for children and families still remains relatively fragmented.

Conclusions: Although the policy has groundbreaking potential, inherent tensions must be resolved and the processes of change carefully managed in order for GIRFEC to be effective. It remains to be seen whether GIRFEC can fulfil the Scottish government's aspirations to reduce inequalities and improve lifelong outcomes for Scotland's children and young people. In terms of both a national children's well-being framework within a universal public service context and a distinct style of policymaking and implementation, the Scottish experience represents a unique case study of whole-country, transformational change and is of relevance to other jurisdictions.

Keywords: well-being, children, early intervention, policy development, policy analysis.

GETTING IT RIGHT FOR EVERY CHILD (GIRFEC) IS A LANDMARK children's policy framework for improving children's well-being in Scotland, United Kingdom.¹⁻³ GIRFEC represents an aspirational and transformational change agenda in terms of promoting well-being and embodying new working practices, and as such, it plays a crucial part in the future direction of child welfare and family policy in Scotland. As part of the Scottish government's wider commitment to addressing inequalities and improving outcomes via early intervention and prevention,⁴ and implicitly part of the solution to tackling disparities, GIRFEC has the potential to be world-leading in its national, strategic approach to enhancing the well-being of all children via universal public services. Yet there are some inherent tensions and uncertainties in the GIRFEC framework and associated legislation, which

if not satisfactorily resolved, have the potential to limit the effectiveness of the policy, with negative implications and unintended consequences for agencies, professionals, and children and families. In this article we first describe the Scottish social and political context, with reference to the devolved system in the United Kingdom, and the recent history of children's policy in Scotland. We then critically analyze GIRFEC, exploring its origins, design, and development; central components; associated legislation; and implementation drivers. Finally, with reference to key aspects of the policy, including well-being, we examine the practice challenges and implications. This article has relevance for other countries with developed welfare systems and child well-being policies.

Background

In recent years there has been increased international interest in the use of early intervention to improve child well-being.⁵⁻⁷ This has influenced government policy in many countries including Scotland, where addressing children's well-being is a fundamental policy commitment and is linked with aspirations to reduce inequalities and improve lifelong outcomes for all children and young people to ensure they can develop, reach their full potential, and become successful, confident, and responsible citizens.^{1-3,8} To this end, GIRFEC is Scotland's flagship children's policy framework.¹⁻³ Representative of a wider shift from child welfare to child well-being,^{9,10} GIRFEC is characterized by its holistic, child-centered perspective, and the concept of child well-being is at its core. With its focus on promoting and improving the well-being of *all* children through the medium of universal public services, GIRFEC is clearly distinctive, particularly as it embodies the cooperative "Scottish approach" of making and implementing policy, distinguished by shifting away from top-down implementation toward the creation of broad policy frameworks administered at the local level with local discretion. We argue that GIRFEC is unique in 3 respects: (1) as a universal children's well-being policy framework that embodies a holistic approach to understanding children's needs with an aspirational commitment to all of Scotland's children; (2) as a whole policy/whole country implementation and national transformational change agenda; and (3) as the epitome of the Scottish approach,¹¹ Scotland's idiosyncratic policymaking style

(in comparison with, for example, the UK government and other welfare regimes).

Despite a general lack of consensus around the definition and measurement of child well-being and the ambiguity of its use as a concept within policy,^{5,12-14} GIRFEC is already being implemented across Scotland, with some key elements of the GIRFEC framework, including the definition of well-being and the requirement for information sharing across organizational boundaries, now enshrined in statute.¹⁵ The aim is that there should be a common interpretation of well-being, with a consistent practice framework based around it, in use across all agencies. Yet the parameters for well-being within GIRFEC, and the threshold for intervention based on the assessment of well-being, allow considerable scope for interpretation, which presents challenges for practitioners. As a national transformational initiative, the GIRFEC approach represents the current and future direction of children's policy in Scotland. Despite policymakers' intentions of integrated services and multiagency coordination, the service landscape for children and families still remains relatively fragmented, and concerns have been raised around issues such as intrusion, data gathering, professional roles, and balancing support for well-being against child protection. As such, GIRFEC's development, implementation, and impact merit in-depth examination and analysis and have relevance for policymakers in other developed welfare states.

The Scottish Context

Scotland is a relatively small country with a population of only 5.4 million people¹⁶ within a total UK population of 64.5 million.¹⁷ With a landmass of 78,772 square kilometers consisting of a mix of large cities and towns concentrated in a densely populated central belt, semi-rural/rural lowlands, and sparsely populated uplands and islands, the country presents a unique socioeconomic, cultural, and political context, aligned with a strong sense of Scottish identity. Scotland is not without its social problems: excessive alcohol consumption remains a distinct part of Scottish culture despite concerted government efforts, including legislation, to tackle alcohol misuse and change Scotland's relationship with alcohol.¹⁸ Persistent health and social inequalities—marked by a widening gap between deprived and affluent communities—are a significant cause for concern, both within Scotland and between Scotland and

the rest of the United Kingdom.¹⁹ For example, Scottish life expectancy, although gradually rising, compares unfavorably with elsewhere in the United Kingdom and most of Western Europe.²⁰ Intergenerational cycles of deprivation and inequality persist: in 2013-2014, more than 1 in 5 children in Scotland (22%) were officially recognized as living in poverty,²¹ and child poverty among unemployed families remains high²²; this is particularly acute in parts of the country where traditional industries have declined, leaving behind persistent pockets of poverty. Despite this history of socioeconomic disadvantage, the Scottish government has repeatedly stated its desire for Scotland to be “the best place in the world for children to grow up.”²³ Although this dominant aspiration is underpinned by a cluster of policy instruments including GIRFEC,² questions remain as to the extent to which these policies are being translated into practical action leading to transformational outcomes.

Scotland has been part of the United Kingdom for more than 300 years, since political union in 1707. Subsequently, all legislation affecting Scotland passed through the UK Parliament, although Scotland retained its own separate church, education, and judicial systems. However, in the late 1990s a system of nonfiscal devolution emerged in the United Kingdom, with varying administrative arrangements and powers granted to each of the 3 devolved UK territories (Scotland, Wales, and Northern Ireland), although matters in many key policy areas, such as defense and benefits/social security, remain reserved to the UK government. Devolution encourages policy divergence by allowing territories to develop policies that are tailored to their particular socioeconomic conditions, although at the same time devolved territories are subject to policy convergence pressures to ensure that their policies do not contradict those of the central state.²⁴ Thus Scotland is broadly subject to similar socioeconomic trends as the rest of the United Kingdom, and its policy agenda has been shaped to some extent by the UK government and UK political parties.²⁵ In key policy spheres where powers have been transferred, however, such as public health and social services, Scotland has diverged considerably from the rest of the United Kingdom,²⁶ particularly since the Scottish National Party (SNP) gained an overall parliamentary majority in 2011.

As Scotland's administration has developed and matured, it has looked to new policy strategies to tackle Scotland's socioeconomic issues,²⁷ based on an aspirational approach. Indeed, aspiration is a dominant and recurring theme across Scottish government policy.²⁸ Scotland's devolution

can be viewed as a natural experiment; in terms of its policies for children, young people, and families, Scotland has attempted to further its aspirational agenda based on the desire to create a socially democratic society while at the same time addressing Scottish needs and the Scottish national interest and following principles of social justice.^{26,29} Against a background of public service improvement and reform, Scottish policy divergence is characterized by integration of public services, greater collaboration and partnership working, and a decisive shift toward prevention in order to tackle persistent cycles of deprivation and reduce inequalities.^{30,31} In keeping with the SNP's prioritization of early years as a key policy concern, the Scottish government has reinforced its commitment to improving the lives of children, acknowledging "the importance of investment in early years and early intervention."³¹

GIRFEC was developed and implemented as a new approach to multiagency practice with the aim of improving outcomes for all children and young people.³² Underpinned by a set of common values and core components, the GIRFEC approach is intended to provide a coherent strategy and program of action to strengthen universal service provision, coordinate multiagency professional practice, and embed early stage/age intervention and prevention within everyday working practices of all agencies and practitioners supporting children and young people, to ensure that children and families get the help they need when they need it.¹ Fundamental to GIRFEC is the provision of a continuum of support, based on an assessment of perceived well-being and built around the individual child's needs.³³ GIRFEC is described by the Scottish government as "the golden thread that knits together our policy objectives for children and young people."³⁴ The need for a fully integrated children's policy and a reorientation of the children's services sector to underpin GIRFEC is thus clear; the question remains over whether this has been or even can be achieved.

Children's Policy in Scotland

International child welfare systems differ, yet typologies within the Western world can be broadly divided into 2 categories/approaches: residual systems in countries such as the United Kingdom, the United States, Canada, and Australia and the universal systems of Nordic and Continental European countries.³⁵ The former embodies protection of

family life and parents' rights, characterized by delayed intervention and a distinction between need and risk, while the latter represents a needs-based, universal, and comprehensive social-democratic model, with assistance provided as part of a state welfare package for children and families that is focused on meeting needs.^{25,36} In recent years child welfare typologies have become more fluid, as the rapid pace of policy and legislative change in many countries, not just Scotland, has influenced children's policy directions and led to the adoption of new approaches, as typified by a prevalence of preventive, evidence-based initiatives³⁷ often in the form of standardized, imported packages.

In Scotland what can only be described as a hybrid child welfare approach has emerged.^{25,35} Having some elements in common with residual systems, Scotland's approach also has some similarities with the Nordic model—guided by principles of social justice, it focuses on the child, emphasizing children's rights, well-being, and development³⁷ and viewing need and risk as two sides of the same coin.³⁸ Indeed, GIRFEC could be seen to represent a more decisive shift toward the Continental West European child welfare model, with its emphasis on universality, collaborative solution-focused support embedded within public services, and holistic view of the child within the wider family. The provision of resources at an earlier stage, as a response to meeting well-being needs rather than an adversarial reaction to protection concerns, evidences this shift. (Nevertheless, by its very nature, GIRFEC challenges assumptions about child welfare and the role of the state, inevitably leading to tensions, which will be discussed later on.) However, this distinctly Scottish approach to child welfare and protection is not new; arguably, it dates back at least 50 years to the publication of the influential *Kilbrandon Report*³⁹ and the development of the Children's Hearings System. The Children's Hearings System is representative of Scotland's approach to care and justice decision making for children and young people, with its most fundamental principle being that children and young people who offend and those who require care and protection are equally deserving to be considered as being in need. Scotland thus takes an integrated, holistic approach to youth justice, with the child's best interest as the paramount consideration.⁴⁰ Certainly, the holistic element inherent in GIRFEC can be traced back to the whole-child approach of the *Kilbrandon Report*, which recommended bringing agencies together to assess the needs of the child and his or her personal and family circumstances.⁴¹

More recently in post-devolution Scotland, significant and ambitious reform to early years and children's policy has taken place, characterized by a gradual shift to child-centered, integrated services; during this period, children and young people have been subject to considerable policy focus by successive Scottish governments.⁴² Influenced by the United Nations Convention on the Rights of the Child (UNCRC) of 1989,⁴³ Scotland's children's policy places the recognition and promotion of children's rights at its core.^{25,44} The endorsement of a rights-based, child-centric approach dates back to the Children (Scotland) Act 1995, a significant piece of children's legislation that provided the legal framework for safeguarding and promoting the welfare of children in need. Subsequently, the publication of *For Scotland's Children: Better Integrated Children's Services*⁴⁵ was a further key milestone in the history of children's policy in Scotland. A landmark review and policy text that set out an action plan for the creation of a single children's service system,⁴⁶ *For Scotland's Children* advocated refocusing on the broader family service prevention and support-based principles and values of child welfare, which had been overshadowed to an extent by the strong emphasis on child protection and its associated adversarial and investigatory response to child maltreatment.⁴⁷ This reorientation of the child welfare approach represented an emerging "child-focused" view across policy and practice of children as active agents, individuals with intrinsic rights, whose lives should be considered holistically, thus requiring broader, more comprehensive policy responses to address the wider social context that affects their lives.⁴⁷ Acknowledging high rates of child poverty and fragmented, uncoordinated services, with many children not receiving the assistance they needed until certain thresholds were reached, *For Scotland's Children* endorsed an integrated approach to children's services, underpinned by information sharing and inclusive access to universal services. This marked a paradigm shift from reactive to preventive services. Most notably, however, *For Scotland's Children* contained the first reference to a "named individual" for every child within the universal services of health and education to coordinate service provision and be the first point of contact for that child and family.⁴⁵ This was the kernel of an idea that would later become one of the more contentious parts of the GIRFEC framework and would eventually be placed in statute.

For Scotland's Children was followed by further key reports as Scotland began to shape its vision for children's services: *Growing Support: A Review of Services for Vulnerable Families with Very Young Children*,³⁶ which

emphasized early intervention and active family support, and *“It’s Everyone’s Job to Make Sure I’m Alright”: Report of the Child Protection Audit and Review*,⁴⁸ which highlighted the role of all universal service providers in child protection and the importance of information sharing and collaboration. By focusing on the well-being of children, these reports opened up the policy arena for a plethora of policies and initiatives for children, young people, and their families, which would be brought together under the umbrella of Scotland’s unique flagship child well-being policy, Getting It Right for Every Child (GIRFEC),^{1,3} and would eventually lead to legislation in the form of the Children and Young People (Scotland) Act 2014.¹⁵ In keeping with broader social policy demands for collaborative and integrative action, the transformation of children’s services, policy, and practice in Scotland has mirrored to an extent that which is taking place elsewhere;⁴⁹ however, the strong emphasis on children’s well-being makes GIRFEC distinctive.

Development of Getting It Right for Every Child

GIRFEC has developed incrementally over time. The roots of GIRFEC emerged from a review of Scotland’s Children’s Hearings System,⁵⁰ which called for both the identification of needs and risks and early intervention. This led to a wider examination of children’s services in general, based on concerns that children were not always able to access the services they needed when they needed them and a consensus that far-reaching changes should be made.²⁵ A range of influences fed into the emergence of GIRFEC; during this period, a number of building blocks were in place for policy to move toward integrating children’s services, such as the development of an Integrated Assessment Framework, which was then incorporated into GIRFEC. Proposals for GIRFEC were first published in 2005.⁵¹ The justification for the GIRFEC approach was clear: there was great variation in the needs and expectations of children, young people, and their families; thus no single service or agency could be expected to meet all of their requirements. The GIRFEC proposals for the improvement of children’s services encouraged improved integration of policy and practice at both national and local levels, so that agencies and practitioners could work together, around children’s needs, to ensure that children received the help they needed when they needed

it.⁵¹ A key principle was early intervention to prevent later crises and improve outcomes for vulnerable children. The proposals laid out the vision for GIRFEC, based on 8 domains of well-being (later known by the acronym SHANARRI)—all children should be safe, healthy, active, nurtured, achieving, respected, responsible, and included.⁵¹ Although the proposals did not explicitly refer to the “named individual” for every child of *For Scotland’s Children*,⁴⁵ under the GIRFEC approach, all agencies and all practitioners would be responsible for children’s development and their “total well-being.”⁵¹

Development of the GIRFEC policy framework followed, with an implementation plan issued the following year⁵² and “Pathfinder” pilot projects established to shape and test the new approach. GIRFEC was thus further refined through its early implementation in the main Pathfinder area, the Highland region of Scotland, between 2006 and 2009. The Highland area was selected due to its favorable conditions, including a multiagency working model and safeguarding processes that were already in place.⁵³ As the Pathfinder progressed, national guidance was produced and GIRFEC was rolled out across Scotland in 2008.³ In 2009, an evaluation of the Highland Pathfinder reported improved outcomes for children, particularly with regard to child protection and changes in professional practice and culture; notably, every child and young person in the Pathfinder area had a “named person” in health or education to act as a single point of contact to access services and to help support his or her well-being.⁵³ The role of the Named Person (usually a public health nurse or a senior teacher, depending on the child’s life stage) was later incorporated into the GIRFEC framework, and updated national guidance was produced in 2012.¹ (A second key practitioner role, “Lead Professional,” also emerged from the Pathfinder work; both roles will be examined in detail later on.) Further, the Highland Pathfinder paved the way for greater collaborative working and a shared outcomes-focused approach.⁵³

Legislation

Although GIRFEC is a national policy, at the time of this writing it has not yet been implemented to its full extent. Scotland’s 32 local authority administrations are charged with implementation, and as such, there is some inconsistency in children’s services across different areas; this is not unexpected, given that the level of practice adjustment required

necessitates time for GIRFEC to become embedded across all services. Acknowledging the diversity in different parts of the country, the GIRFEC framework does allow some local flexibility to fit in with existing local structures. However, with each of Scotland's local authorities at a different stage of implementation and with varying local interpretations, culture change and progress toward national implementation have been slow. Legislation was viewed as necessary to accelerate progress already made and to ensure consistent implementation of GIRFEC across Scotland. In 2013 a bill was introduced to embed the GIRFEC approach into a national integrated system of planning and delivery of children's services by "putting children and young people at the heart of planning and delivery of services and ensuring their rights are respected across the sector."⁵⁴ The Children and Young People (Scotland) Act 2014¹⁵ was passed into law by the Scottish Parliament in February 2014. The act, described as the most significant piece of legislation since the Children (Scotland) Act 1995,⁵⁵ is far-reaching, spanning policy areas such as kinship care, preschool education, and care leavers; the GIRFEC provisions represent only 3 of its 18 parts. Notably, the act put an understanding of well-being, based on the 8 SHANARRI indicators, into law. Draft statutory guidance on the act's GIRFEC provisions was published in February 2015, and formal consultation followed, with an analysis of responses published in June 2015.^{56,57} All agencies will be required to implement the provisions and duties of the act; the GIRFEC-related aspects will come into force in August 2016.

Components of the GIRFEC Approach

The GIRFEC framework consists of 2 key elements: (1) the roles of Named Person and Lead Professional and (2) the National Practice model (comprising 3 assessment tools and a single child's plan, used by practitioners for assessment, planning, and action). These elements are underpinned by GIRFEC's core components¹ (Box 1) and supported by the legislation that puts the concept of well-being and the role of the Named Person into statute. Successful implementation, however, requires significant change at the levels of system, culture, and practice, including multiagency collaboration and information sharing.

The practitioners who have roles and responsibilities in promoting the well-being of children are outlined within the GIRFEC framework.

Box 1. GIRFEC Core Components^a

1. A focus on improving outcomes for children, young people, and their families, based on a shared understanding of well-being
 2. A common approach to gaining consent and to sharing information where appropriate
 3. An integral role for children, young people, and families in assessment, planning, and intervention
 4. A coordinated and unified approach to identifying concerns, assessing needs, and agreeing on actions and outcomes, based on the Well-being Indicators
 5. Streamlined planning, assessment, and decision-making processes that lead to the right help at the right time
 6. Consistent high standards of cooperation, joint working, and communication where more than one agency needs to be involved, locally and across Scotland
 7. A Named Person for every child and young person and a Lead Professional (where necessary) to coordinate and monitor multiagency activity
 8. Maximizing the skilled workforce within universal services to address needs and risks as early as possible
 9. A confident and competent workforce across all services for children, young people, and their families
 10. The capacity to share demographic, assessment, and planning information electronically within and across agency boundaries
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^aFrom *A Guide to Getting It Right for Every Child*.¹

The 2 key roles are the Named Person and Lead Professional, although only the Named Person is set out in legislation. All children in Scotland will have a Named Person, but the intervention of a Lead Professional will only be necessary in certain circumstances and will not be required for most children.

Following enactment of the legislative elements in August 2016, every child in Scotland up to the age of 18 will have a Named Person available to him or her within the universal services of health or education. The Named Person is the gatekeeper to services, acting as the single point of contact for the child and his or her family. For example, depending on the age of the child, his or her Named Person may be a health visitor at the preschool stage or a teacher at school age. (The

individual practitioner assuming the role will change at different transition points in the child's life, such as when the child starts school.) However, in the cases where multiagency or specialist, complex support is required and/or where child protection concerns are raised, the Lead Professional, most likely to be drawn from social work, will step in to coordinate multiagency services and take overall responsibility for the child's support package.

The GIRFEC National Practice model is followed when concerns arise about an individual child. It provides all agencies and practitioners working with children and families with a clear process of assessment, analysis, and action, supported by a common language, within a single framework.⁵⁸ Based on the SHANARRI well-being indicators, the National Practice model aims to promote consistent assessment and planning for children and outlines the steps that practitioners should take to identify and address concerns, with the emphasis on early intervention. It incorporates a holistic, ecological approach that takes into account the context of the whole child; the child's family, community, and environment; and the interactions within and between different aspects of the child's life.³⁸ The evidence-based assessment tools that form part of the model are grounded in child development theory^{38,59-62}; their development was informed by experience of the Assessment Framework in England.^{63,64} The 3 assessment tools (the SHANARRI well-being indicators, Resilience Matrix, and My World Triangle) present a new way to frame children's needs. They are intended to be used by practitioners to gather information about a child's well-being to identify concerns and determine what support and action may be needed, with the My World Triangle informing the assessment from the child's perspective by examining the 3 dimensions of a child's world (the child himself or herself, the child's family, and the child's wider environment). The child and family are placed at the center of the assessment and planning process: the GIRFEC approach is designed to put children's needs first by ensuring that children and families are listened to and that they understand decisions affecting them.¹ Working in partnership with families is viewed as crucial; GIRFEC takes the position that without incorporating the service-user perspective, information gathering is incomplete and full understanding of a child's circumstances cannot be reached.³⁸

Key to successful implementation is GIRFEC's integrated approach, hence the concept of a single assessment framework and a single child's

plan, effective across multiple agencies. This reflects a shift from the traditional, often entrenched “silo” mentality—single-service models where agencies, operating independently of one another, are concerned only with the sole aspect of the child’s life that is their responsibility—to viewing needs and concerns within the broader context of the whole of a child’s life and taking a collaborative, multiagency approach to meet those needs at an early stage.³⁸ Thus GIRFEC demands a reorientation of services, and of the cultures and attitudes inherent within them, across the entire sector.

Discussion

The Wider Children’s Policy Context

GIRFEC is an overarching framework that spans a plethora of early years and children’s initiatives, and as such, the GIRFEC approach is influenced by key Scottish government national policy drivers relevant to children, young people, and families. GIRFEC evolved during a period of national policy change, with a range of crosscutting childhood initiatives emerging across various policy domains, including health, education, and social care. Policies such as Health for All Children 4 (routine health assessments and screening in the early years), Curriculum for Excellence (a national education curriculum for learners aged 3 to 18), Equally Well (an action plan to address health inequalities), Achieving Our Potential (a framework to tackle poverty and income inequality), the Child Poverty Strategy for Scotland (an initiative for addressing maximizing income and improving the life chances and well-being of children in low-income families), and the Early Years Framework (an integrated national early years policy with an emphasis on prevention and early intervention) form a seemingly complex policy landscape.^{8,65-68}

Complexity notwithstanding, these policies embody Scotland’s strategic approach to children and families,²⁸ that, it can be argued, represents a unique, hybrid child welfare model which by its very nature is difficult to classify within traditional taxonomies. Together, GIRFEC and the other initiatives described above aim to facilitate transformational, integrated change across the entire sector by demanding outcomes-focused interagency connections and interprofessional relationships,⁴⁹ with the focus on outcomes (as opposed to outputs) representing a convergence of Scottish children’s policy trends.⁶⁹

A functional analysis of Scottish policy documents relating to children, young people, and families found that all the policies were linked by clear aspirations to improve children's well-being outcomes in order to tackle the inequalities that stem from unequal childhoods.⁷⁰ As the "lead document," it is GIRFEC that most reflects the Scottish government's aspirations for children and childhood and sets out the clearest path from policy to practice.²⁸ GIRFEC builds on the priorities identified in the Early Years Framework,⁸ which states that inequalities in the early years should be addressed to achieve a better quality of life for children in the short term and to reduce overall inequalities in the longer term.³²

When policy ambitions are high, however, turning aspiration into action is a challenge. The children's workforce is viewed as the "agent of change" to achieve policymakers' aspirations.²⁸ The Scottish government's intention is for the GIRFEC approach to underpin *all* work with children and young people in the public services sector, and in many areas, such as education, this is beginning to be the case. Policymakers envisaged a range of services forming a spectrum of support for children and their families; yet in some parts of the sector disconnect seems to be lingering, and this has affected practice, with some services still appearing to be discrete or parallel entities, suggesting further integration is required.⁷¹ For example, it is arguable that formal child protection processes are not yet fully integrated within GIRFEC given there are a number of stand-alone policy documents covering child protection guidelines, practitioner standards, and a risk assessment framework.⁷²⁻⁷⁴ While GIRFEC has brought about a shift in focus from individual child protection to the more inclusive *all* children,⁷⁵ it appears that further integration may be required to ensure that the formal statutory child protection investigative aspects of children's services are incorporated within the wider GIRFEC approach rather than being seen as a parallel activity. As it stands, although child protection services fit conceptually into the model of support for children and their families outlined by the GIRFEC framework, the more detailed work to support that fit has not yet been carried out at practice level across the relevant services. Disconnect within children's policy is further exemplified by the Early Years Task Force—a body charged with providing a strategic and coordinated approach to early years policy across the public sector, ensuring that public spending on the early years of children's lives and early intervention are prioritized—and the closely aligned Early Years Collaborative, which brings together partners from a number of

different agencies, using quality improvement methodology to facilitate change in specific areas of health and to achieve improvement in early years outcomes. Although in theory these 2 initiatives are underpinned by GIRFEC principles and thus should support GIRFEC's implementation, they are not formally part of the GIRFEC framework, and as such, how they relate to GIRFEC is unclear; hence there is the danger of overlap, with multiple initiatives working at cross purposes with little coordination between their activities. Finally, there is a need to ensure that for services working holistically with the whole family, GIRFEC procedures are linked with health and social care policies for adults; currently the GIRFEC focus is only on children and young people up to the age of 18.

Well-being

The concept of well-being is central to GIRFEC. The current focus on children's well-being reflects that discourses around children, childhood, and associated public policy have shifted considerably over recent years.¹² Not only in Scotland but across the United Kingdom, a new language has emerged to express the changing aspirations of policymakers; while previously the emphasis was on "child welfare" and "child care," the shift to framing policy in terms of "child well-being" and its associated outcomes represents a new holistic, child-centered ecological approach, which acknowledges the systems around the child and family.^{10,76,77} Despite the policy intentions for GIRFEC, some critics argue that its well-being model is not fully defined; instead, well-being is "described" by the SHANARRI indicators in relation to assessment,^{78,79} which presents a "particular vision" of well-being, leaving some scope for interpretation.⁷⁹ Notwithstanding this criticism, the interpretation of well-being embedded in GIRFEC appears to fit with definitions of child well-being that are intrinsically linked to the notion of realizing children's rights.^{5,77} However, Tisdall⁷⁸ argues that although often paired together, children's well-being and children's rights are vastly different concepts, both methodologically and politically, and as such, the relationship between the two within the Scottish legislation is confusing and problematic. The focus on well-being appears to have been at the expense of the wider concept of children's rights.⁵⁵ Indeed, the provisions within the Children and Young People (Scotland) Act 2014 on children's rights are arguably weak.^{55,80} The act places duties on ministers to "keep

under consideration” their approach to implementing the United Nations Convention on the Rights of the Child (UNCRC) and to promote public awareness and understanding of the rights of children. These provisions can be viewed as a dilution of existing obligations under the UNCRC as part of its UK ratification.⁸⁰ Public authorities who are responsible for GIRFEC implementation have been given little meaningful obligation relative to children’s rights, other than the requirement to report on what steps they have taken with regard to UNCRC responsibilities; however, in relation to well-being, their duties are stronger, affording well-being the more dominant position in the legislation.^{55,78}

GIRFEC’s holistic view of well-being incorporates asset-based notions of resilience (the capacity to transcend adversity⁸¹) and coproduction (a relationship between service provider and service user that draws on the knowledge, ability, and resources of both to develop solutions⁸²); indeed, resilience is viewed as a protective factor in children’s well-being.⁸³ Building on the assets and resilience of communities to achieve better outcomes is fundamental to the Scottish approach to the design and delivery of public services, characterized by a consultative, cooperative style and local discretion.^{11,84} The emphasis on resilience is indicative of the proportionate and aspirational approach built into GIRFEC, where in terms of assessment, a balance is struck between identified strengths/resiliencies and needs/vulnerabilities. However, a balance must also be struck between need and risk. The GIRFEC approach views need and risk as two sides of the same coin, necessitating an understanding of how needs and risks fit within the context of a child’s well-being and his or her “whole world.”³⁸ The GIRFEC framework is designed to meet the well-being needs of children and young people as a way of reducing potential risk.⁸⁵ Thus GIRFEC aims to identify children who may be in need at an early stage, allowing services to intervene soon enough to prevent this need from turning into a more significant and harmful risk.⁷⁵ There are tensions inherent in balancing needs against risks, however, and these tensions have to be negotiated and managed by frontline practitioners operating within a context of potentially competing discourses of need, risk, and well-being.⁸⁵ Therefore, in practice, it appears that the promotion and safeguarding of children’s well-being require a full rather than superficial understanding of well-being and children’s rights.⁴⁹ Responses to the recent consultation on statutory guidance suggest that a common shared understanding of some of the central elements of GIRFEC has not yet been realized and that

various aspects, including assessment of well-being and interpretation of the role of Named Person, require clarification.⁵⁷ While this ambiguity with regard to well-being—notwithstanding the more general scope for interpretation within the GIRFEC guidance and legislation, whether intentional or not—may itself be a further embodiment of the Scottish approach, it is not without its challenges. Further, it is argued that GIRFEC and its associated legislation, although well-intended, do not address the wider political or structural aspects of well-being, such as the status of children, the effects of poverty, and the fundamental causes of inequality,^{69,75,79} although it is important to note that devolved Scotland does not currently have control over all the policy areas that relate to inequalities.⁸⁶

Named Person Controversy

There has been opposition to the Named Person in some quarters, based on fear of intrusion into family life and the perceived net-widening surveillance powers of the state, given that the Named Person will apply to all children, not just those whose welfare is considered to be at risk and thus may require statutory intervention.⁸⁷ This opposition culminated in a failed legal challenge in the Scottish courts,⁸⁸ although there is still an active and ongoing “Say No to the Named Person” grassroots campaign, which resulted in an appeal to the United Kingdom Supreme Court in London in March 2016 (at the time of writing, the verdict has not yet been issued). While the welfare aspects of GIRFEC are universally supported, critics argue that evaluating parenting in terms of well-being is contentious, taking into account the perceived lack of clarity within the recent guidance and the subjective and challenging nature of well-being assessment and the associated thresholds for intervention.^{57,87} Although the emphasis on “every” child has fueled the debate, it may be argued nevertheless that a more neutral term such as “first point of contact” would have been less controversial than a “Named Person for every child.” Significantly, the Named Person role has become “Named Person Service” in the legislation, a necessary step to place the duty of statute on local authorities and health service administrations, which will be required to provide the relevant training and support to practitioners designated to act as a Named Person. This change ensures that responsibility for the role and actions of the Named Person lies with the agency providing the service, not with individual

practitioners. Whether in the form of a role or the provision of a service, many practitioners who already work with children, such as nurses and teachers, may be obligated to extend their current duties to accommodate the requirements of the Named Person Service, which will involve monitoring children's needs, albeit within the context of their existing work. This has led to concerns regarding the capacity and resources of some services, notwithstanding the level of expertise required to make assessments of well-being,⁸⁷ although for some practitioners, the Named Person duty is largely a formalization of existing practices.³² Nonetheless, the Named Person debate has raised issues around the perceptions of professional roles and related concerns surrounding the values inherent within professional cultures. Further, it may be argued that GIRFEC's influence allows the Scottish government to direct the working practices of professionals and the nature of their relationships with children and families.⁷⁵ Finally, despite placing the child and family at its center and its principle of "working in partnership with families,"¹ GIRFEC, it can be argued, does not challenge existing power relations between professionals and parents and families, particularly the most vulnerable families.

Information Sharing

The potential impact of the information-sharing requirements of the GIRFEC-related legislation and how these new arrangements fit with existing data protection and information governance laws have caused some unease.^{57,87,89} Given that GIRFEC is about early intervention and prevention, it is likely that information will have to be shared between practitioners and services before a situation reaches crisis point: in effect, information sharing to benefit well-being as opposed to preventing significant harm. Potentially, this will result in well-being concerns triggering data sharing at a much lower threshold than would usually initiate child protection procedures and automatic information sharing. Not only are information-sharing thresholds lower, however, but the grounds for sharing information have been broadened; this will lead to changed confidentiality arrangements for some services.⁸⁹ The new information-sharing duty raises issues around both the disclosure of information without consent if there is a perceived risk to well-being and, significantly, the *nature* of this information.⁸⁷ In response to these concerns the Scottish government sought guidance from the

UK Information Commissioner's Office in order to clarify the circumstances in which information can be shared without consent, providing reassurance that practitioners making good-faith decisions to share information in the best interests of children will not be penalized under data protection laws.⁹⁰ In addition, local authorities and other public bodies have carried out staff training and produced their own guidance and protocols in recognition of their statutory duties in relation to information sharing. These responses, however, have done little to assuage concerns over the potential for increased "surveillance" of children and families; the gathering of multiple pieces of information, with or without consent; and the ways in which these data will be retained, shared, and used by practitioners and services across agency boundaries.⁸⁷

Full Implementation of GIRFEC in Practice

Implementation of the legislative elements of GIRFEC will take place in August 2016. As previously discussed, there are a number of as yet unresolved issues that have arisen from both the GIRFEC framework and the related legislation. This may be in part because the Children and Young People (Scotland) Act 2014 represents an attempt by the Scottish government to place in statute elements of a policy that in some respects, it could be argued, had failed, hence the need for legislation. The GIRFEC approach had been intended to succeed through a mix of policy, persuasion, and investment. In some geographic areas implementation has been successful, yet in other areas the pace of culture change has been slow, perhaps partly due to the flexible nature of local execution. Therefore, the Children and Young People (Scotland) Act 2014 defines the aspects of the GIRFEC approach that did not achieve success through policy alone and thus had to be enshrined in statute.

The emphasis on universal service provision within GIRFEC, as opposed to a targeted approach, will indeed require transformational change in some parts of the sector, given that many services are organized around responding to problems, rather than providing universal and preventive support.⁹¹ Although GIRFEC is built on the universal services of health and education,¹ they are supplemented when necessary by other social care services (eg, social work) as well as various targeted specialist services. Despite this, the transition to a universal approach has led to

fears that certain services will be either sidelined or subsumed within an integrated framework of mainstream services; this is particularly pertinent for child protection services, given that GIRFEC is aimed at all children, not just those identified as being at risk.⁹² Although the Highland Pathfinder evaluation found that children were safer during the GIRFEC pilot than they were prior to it,³³ there are still unresolved concerns about the place of existing child welfare/protection services and the Children's Hearings System within the new arrangements.^{92,93} It is argued that there has been a blurring of the distinctions between "welfare-risk" and "well-being-risk."⁸⁷ Although child protection (when viewed from a policy perspective) is situated within the context of well-being as part of broader GIRFEC principles,⁷² in practice the uneasy fit between child protection services and the GIRFEC approach highlights the tensions inherent within GIRFEC surrounding its universal model of well-being assessment balanced against the need to protect the most vulnerable children.⁸⁵

Yet it is the universal approach of GIRFEC that is key; the GIRFEC framework and the SHANARRI well-being indicators apply to all children in Scotland, and in its pursuit of well-being outcomes, GIRFEC has the potential to transform the lives of Scotland's children and families. Nonetheless, there is a danger that inclusive policies that do not specifically highlight and prioritize the complex needs of particular groups may unintentionally exclude them, given that multiple vulnerabilities impede access to and engagement with services.^{94,95} Those in potentially excluded groups (such as disabled children, children with mental health issues, or children with life-limiting medical conditions) often need additional support to reap the same benefits as others from universal services.⁹⁴ Further, it is worth considering what the SHANARRI well-being indicators, and their definitions of "healthy" or "active" for example, may mean to such children. Although the GIRFEC model is considered universally appropriate, there are still a number of separate policies and services aimed at the needs of diverse groups, but how these fit into the overarching GIRFEC framework at national level is not yet fully clear. This plethora of policies has resulted in a service landscape that can be complex and thus confusing for service users to navigate.⁹⁴ Despite these criticisms, the shift away from targeted approaches, which although helpful can stigmatize and isolate certain families, to a universal service model that does not single out particular groups is viewed as a positive one.⁹¹

Conclusion

Getting It Right for Every Child encompasses far more than just children's well-being concerns; it is a far-reaching, cross-sector policy⁴⁹ that has incrementally evolved over more than a decade and is strategically "threaded through all existing policy, practice, strategy and legislation affecting children, young people and families."¹ Notwithstanding the issues raised earlier, the ethos behind GIRFEC—the promotion and support of children's well-being via universal services—is laudable; GIRFEC's theoretical basis and practice frameworks are evidence-based, well-developed, and robust. Highlighting the importance of understanding children's lives in context,²⁸ GIRFEC changes the way in which children's needs are identified and met, requiring effective collaboration and practical action—in the form of a staged intervention approach—on the part of practitioners across multiple agencies.³² The GIRFEC components fit together well, and GIRFEC itself represents an integrated approach to policymaking, with a coordinated agenda across social services, health, and education and a common, shared understanding of well-being. GIRFEC's prominence underlies the recent shift from process-led to outcomes-focused interventions. Although full implementation of the legislative aspects (such as the Named Person Service) will take place in August 2016, the GIRFEC framework has already been rolled out across all Scotland's local authorities, crosscutting a variety of policy areas, such as maternity services and education.^{96,97} Within child welfare practice, GIRFEC has encouraged both a shift in emphasis toward actively engaging families in identifying their concerns and challenges and a more holistic view of the child.⁹⁸ This has been accompanied by an emergent belief that success must be measured in terms of outcomes for children, not service outputs.³³

Yet GIRFEC is more than just a policy framework; it represents a distinct way of thinking and a transformational shift in the form of an agenda for change, and further, may represent a new and emerging child welfare model. Scotland now faces the challenge of translating its ambitious policy aspirations into practical action when the GIRFEC-related statutory provisions commence in August 2016. Whole system adjustment to accommodate GIRFEC is required within the children's workforce; in order to achieve better outcomes for Scotland's children, systemic change must be accompanied by changes in professional practice.³³

The transition to new working practices is already under way, although complete culture change, leading to an effective integrated approach to service planning and delivery, may be slow to transpire. Outside the provisions made in the legislation, implementation of GIRFEC is still likely to vary across local authorities; the framework has an element of built-in flexibility and can be adapted to fit the local needs of different geographical areas. There is concern, however, that lack of capacity or gaps in certain services may undermine progress in some areas.^{57,98} The Scottish government's wish is that GIRFEC processes will permeate all work with children and young people. Successful implementation requires complete understanding of the concept of well-being, the roles and responsibilities of practitioners, and the use of the assessment tools; yet the recent consultation on the national guidance highlighted that further work is needed in all of these areas.⁵⁷ For example, even with the publication of official guidance, there still appears to be a lack of consensus on how to define and measure well-being, which is problematic given that well-being is GIRFEC's central tenet.^{57,69} Despite sound theoretical underpinnings, due to its incremental expansion, GIRFEC has become more complex over recent years, and hence its interpretation has caused debate and some confusion. There is a concern that the controversy around the Named Person has to some extent obscured what the Scottish government is trying to achieve and its reasons for doing so. Arguably, the Named Person work is being done already; formalizing it has fueled the debate, which has led to conflicting interpretations of what the role will mean in practice. GIRFEC also requires active engagement on the part of children and families—yet there are fears that it is parenting that is being assessed, and as such, the Scottish government and those implementing GIRFEC must work to overcome these worries.

Full implementation in August 2016 thus presents a challenge for policymakers, who in order to find a positive way forward should attempt to address a number of as yet unresolved concerns, including the definition of well-being, thresholds for intervention, the implications of lowering information-sharing thresholds, professional roles and practices, tensions between support and protection, and issues of privacy and intrusion. It may be that the key to successful implementation is not in the detail of the legislation and the transformational changes required but in the way these processes of change and associated uncertainties are introduced, negotiated, and managed. Scotland is in a potentially

strong position to improve the lives of its children, particularly those whose lives are affected by structural disadvantage and family problems. It remains to be seen whether full implementation of GIRFEC will result in the improved outcomes for all children and families that the Scottish government seeks, to ensure that Scotland becomes the best country for children to grow up in. Yet the turn of events in Scotland has significance beyond its borders; given that Scotland is trying to effect a whole system change, the Scottish experience can offer useful lessons for other jurisdictions considering similar transformational change.

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Address correspondence to: Emma Coles, Nursing, Midwifery and Allied Health Professions Research Unit, Scion House, University of Stirling Innovation Park, Stirling, FK9 4NF, United Kingdom (email: emma.coles@stir.ac.uk).