Gloucestershire County Council

The elements of good practice:

Fitting it all together



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A guide to good practice

GCC has introduced a number of pieces of important guidance on key areas of practice. They are complementary and taken together will support good practice and management oversight. So what are the connections?

The **Essentials** training programme identifies the **principles** behind key elements of social work intervention as follows

- → Assessment
- Planning
- → Purposeful visiting
- Management oversight
- → Review.

These are connected by the golden thread of the *Anchor Principles* which describe the crucial process of understanding the child's story, what it means for the child (impact) and what needs to be done.

More recently we have introduced Practice Fundamentals in a single A3 document. This picks up the headings from Essentials listed above, and adds case recording. For each of these headings it sets out a list of accountabilities - the things that have to be considered and responded to. The range of information within this document is rich and at it provides a comprehensive checklist when we plan, conduct, oversee and review the different elements of practice. In this sense it is a tool for managers and social workers alike.



We know social workers often struggle with analysis. This is not unique to Gloucestershire: it is often identified by Ofsted in inspections. We have therefore written a short document that provides guidance on what is analysis within assessment and why it matters. It includes short practice examples to assist. This document can be read alongside the Anchor Principles to help social workers make sense of the important information they gather about children and families. It can also be read alongside the impact cards. These give examples of the sorts of impact that some adverse

childhood experiences can have and are a tool for identifying and evaluating them with children. Good analysis will help social workers develop good quality **C-SMART plans** that in turn structure their direct work.

Also in the range of aids to good practice are the **neglect toolkit** and the **pre-birth protocol**. These must be used when appropriate.

Below are explanations and illustrations of how all these elements fit together to help social workers as they work with children and families.



A written illustration

Completing an assessment

- Refer to the Anchor Principles and Risk Assessment Principles cards (Essentials).
- → If appropriate, use the Neglect Toolkit and/or the Pre-birth Protocol.
- Gather the information you need to be clear about the story.
- Complete your analysis: what does the story mean? Refer to the Impact Cards and the document below, What is analysis?
- Use Practice Fundamentals to check you've covered everything you need to.
- You should now know:
 - » what the story is;
 - what impact and likely impact (including harm) there are for the child;
 - » what changes need to occur to make the child safe and meet their needs;
 - what the child and the parents understand, what they think about their situation and what they want to happen next;
 - » what interventions and direct work are needed to help make the changes;
 - what progress will look like and how you'll know when it's enough or you need to do something different.

 that your manager has checked your assessment and recommendations against Practice Fundamentals and signed it off or asked you to do some more work.

Writing the plan

- Your analysis gives you the basis of a good plan, so refer back to that.
- → Refer to the C-SMART Plan principles (Essentials).
- → Refer to the Anchor Principles, as it is these that ensure connection between assessment, analysis and plan.
- Write the plan using these principles.
- Also use the idea of language that cares. Think about how the child or young person will feel when they read their records in years to come.

 Avoid talking about them as a "case" they are a child or young person. Use "brothers and sisters" instead of siblings. Write about them "spending time with their family" rather than "contact"; and their "foster home" or "where they live" rather than "placement".
- Check the plan against Practice Fundamentals.



- → Your manager will check the plan against Practice Fundamentals and your assessment and either sign it off or ask you to do more work on it.
- You should now have a C-SMART plan, shared with the family, that makes clear:
 - » a focus on the child's needs:
 - » what needs to change and why:
 - who will do what, when and how to help achieve that change;
 - » how progress will be measured and how we will know there has been enough;
 - » what will happen and when if sufficient progress is not made.



Intervention and direct work

- → Your C-SMART plan gives you the basis for purposeful direct work that clearly addresses the needs and risks you have identified in your assessment.
- In planning and preparing for your work with the child and family, refer to the Purposeful Visiting Principles.
- Refer to the Anchor Principles in reviewing and analysing what you learn from the visit.
- → Use this continuing analysis to propose and make any necessary changes to the plan, for example removing actions that have been achieved and adding actions to meet changing need or risk. (Of course, if you become aware of increasing risk levels then you will need

- to revise your analysis to prompt appropriate and if necessary urgent action).
- → Use Practice Fundamentals to help you plan, carry out and review direct work. This will help you ensure you consider everything you need to cover.

Management oversight

- → Team managers can refer to all of the principles cards in exercising oversight and providing direction. They will help ensure the assessment is sound, the plan C-SMART, direct work purposeful and that the thread of the Anchor Principles joins them all up.
- They should also use Practice Fundamentals to make sure both they and the social worker have covered all necessary tasks and angles.

→ The Practice Fundamentals sampling tool, introduced in August 2020, enables us evaluate the extent to which practice and management oversight are informed by Practice Fundamentals.

Review

- → For issues of risk, use the Risk Review Principles.

 While these refer to risk, they also set out basic principles for reviewing other activity.
- → Refer also to Practice
 Fundamentals and Anchor
 Principles to ensure we
 review progress against the
 measures identified in the
 assessment and the plan.
- Identify changes needed to the plan in the light of progress or lack of progress.



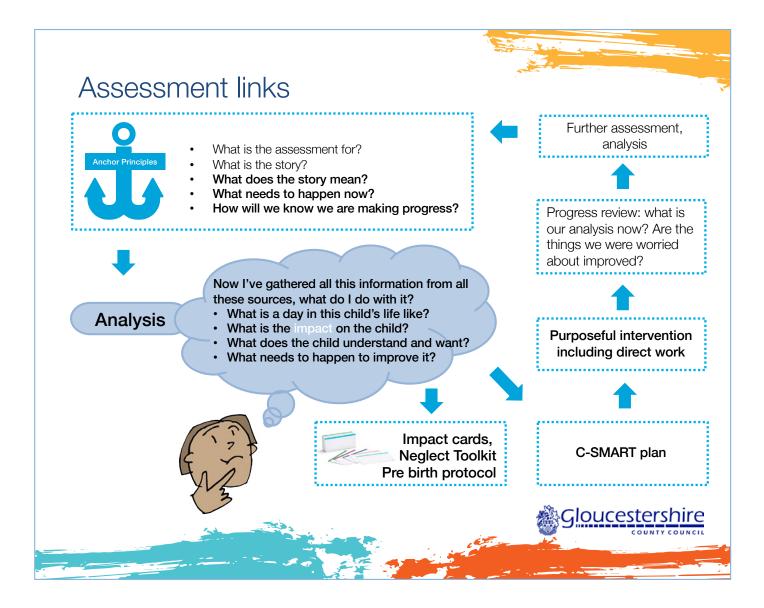
Table illustrating the connections

Step	Resources to help practice	Comments
Assessment		Assessment = Information + Analysis + Next Steps. It is the process of developing an understanding of the child's life, identifying strengths and what we're worried about and the actual and likely impact on the child of what is going on.
	Anchor Principles	The Anchor Principles set out the components of assessment.
	Risk Assessment Principles	These develop the Anchor Principles with specific reference to risk.
	What is Analysis?	Analysis is the component of assessment in which we should evaluate all the information we have gathered about the child and what it means for them. This short document explains analysis, with some hints, questions and examples for illustration. They refer to the importance in analysis of considering the impact on the child's life
	Impact Cards	These illustrate the types of impact on the child to look out for when completing an analysis . They are best used with the child where they are of sufficient age and understanding
	Practice Fundamentals	These provide a valuable checklist for social workers and managers to ensure that their work has covered all the important elements, including analysis.
	Neglect Tool Kit	Use of this is mandatory when neglect is suspected or identified. It supplements single assessment and helps evaluate neglect and its impact. It also supports the notion of assessment as a continuing process because it enables progress to be tracked over time.
	Pre-birth Protocol	Use of this is mandatory when we are concerned an unborn child may be at risk after birth. It supplements single assessment and helps evaluate needs, risk and likely impact. It supports early planning to meet need and mitigate risk.
Planning	C-SMART Planning Principles Card	These set out the components of a good plan.
	Anchor Principles	These connect the assessment to the plan: given what we know and our analysis of it, what needs to happen now, who is going to do it, by when, how will we know progress is being made?
	Practice Fundamentals	These provide a valuable checklist for social workers and managers to ensure that their work has covered all the important elements needed to develop a C-SMART plan.

Step	Resources to help practice	Comments
Direct work	Purposeful Visiting Principles Card	Guidance on planning for, conducting and reflecting on direct work, and shaping next steps. It does not cover direct work skills and tools.
	C-SMART Planning Principles	Direct work should be guided by the plan, which derives from assessment. Planning and conducting direct work with explicit reference to the plan can engender purpose and direction.
	Anchor Principles	In completing direct work we should be considering whether there is progress and how much. This should inform next steps.
	Practice Fundamentals	This provides more help in understanding the key areas to address in direct work. It can aid planning, reflection and next steps and ensure we cover the things for which we are accountable.
Management oversight	Management Oversight Principles	Outlines basic elements of management oversight and its recording. Needs to be read with the other Essentials Principles cards.
	Anchor Principles C-SMART Planning Principles Purposeful Visiting Principles	These will all help the team manager evaluate the quality and impact of work done, and enable them to provide evidence in LL of routine oversight, case direction and decision-making.
	Practice Fundamentals	Sets out in more detail management accountabilities for the direction and quality control of practice at child level.
	Practice Fundamentals sampling tool	Enables practice to be evaluated against Practice Fundamentals.
Review	Risk Review Principles Card	The key stages of reviewing the impact of our intervention in reducing risk and determining through further assessment and analysis the next steps.

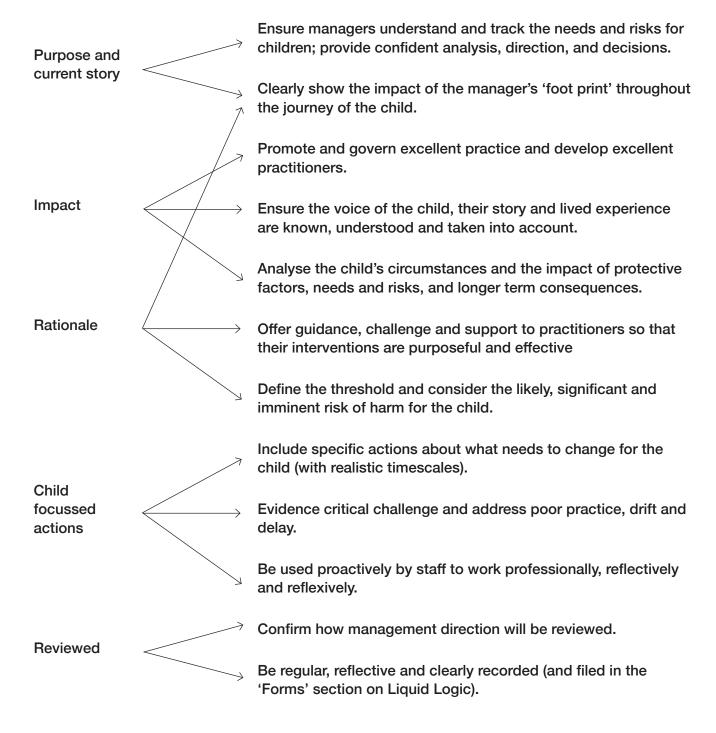


Assessment links



Essentials in fundamentals

Management Oversight Supervision and Management Oversight



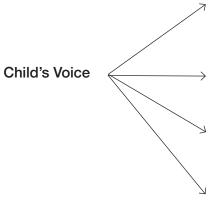
Purposeful visiting

Visiting and Direct Work and Case Recording

Purpose

Support children and young people to benefit from a safe, stable and trusting relationship with their worker.

Be timely, purposeful (guided by the child's plan) and persistent.



Help children to address their worries and concerns by explaining what is happening and why. Include a variety of approaches in line with the child's age, understanding and preferences, interaction.

Be personal to the child and not simply a duplicate of sibling records

Consider the impact of life experiences and our practice on the child.

Ascertain the child's independent views, wishes and feelings and take these into account in planning and decision making.



Help in understanding and respectfully addressing barriers to engaging.

Work together with parents/carers, including those who are separated, divorced or live apart from the child.

Safety Plan

Support the developments of a safety plan where needed, and identify a trusted adult to build safety for the child.

Analysis

Reflect and promote Systemic Practice principles and tools as the emerging model of social work practice.

Include an evaluation of the available information/evidence (making a judgement).

Anchor Principles

Assessments

Be timely, proportionate and focused on the relevant issues. What is the Assessment Be regularly reviewed, and updated in line with significant life for? events. What is the Give a clear picture of the child's life, what this feels like for Story? them, and what needs to happen to improve it. Address the impact of parents' behaviour on the lived experience of the child, including capability and capacity to change. What does the Take the voice of the child, the views of parents and relevant story mean? others into account. Be informed by an updated chronology of significant events for the child with an ecomap/ genogram What needs to Be shaped and directed by management oversight provided on days 1, 8, 20, 30 and 40 for all open assessments. happen now? Allow for the use of intervention and safety planning during assessment as needed. Include consultation and checks with relevant partner agencies and professionals who know the child and family. Be professionally curious, evidence based and informed How will we by best practice tools and research, including around child know we are

development.



making progress?

SMART planning principles

Planning and Reviewing

Child Focused Attend to legal, physical and psychological permanence for children. Specific Maintain clear continuity from the assessment and analysis. Always reference the Essentials CSMART planning principles so that the plan maintains focus on the child and represents their views. Measurable Learn from, and adapt to, what has previously worked well and less well. Identify what progress will look like and how it will be evaluated Achieveable Include careful consideration of contingency arrangements. Include routine consultation with CP Chairs and IROs who will Relevent check and follow-up progress for the child through progress checks. Evidence the use of Escalation and Dispute Resolution Protocols to challenge decision making and planning when necessary. Be timely and kept up to date with expected timescales, that **Timely** keep pace with the child's needs and changing circumstances. Engage parents, carers, family and friends to identify and build on existing strengths.

Analysis in assessments

Analysis is a critical component of assessment. This is true for all forms of assessment in all walks of life – business, medicine, teaching and indeed social work.

Despite its importance it is often misunderstood. Ofsted inspectors and children's case auditors frequently find that social workers gather a rich array of information about a child and their family, and then repeat what they see as key parts of the information as their analysis. This is not analysis.

Defining analysis

So what is analysis in children's social work? In short it is the process of making sense of information – understanding what it means, and using that understanding to identify what is needed to improve a child's life. It is a fundamental part of assessment, but it is more than that. As we know from GCC's Essentials programme analysis is something we do in all stages of our work with a family. It informs and should be evident in our plans, interventions, reviews, supervision and management oversight.

In a little more detail, it is the process of answering some key questions. All of these relate closely to the Anchor Principles.

- → What does all this mean for the child right now? What has the child's life been like? What is it like now? (A day in the life). What are the factors that have caused it to be like this?
- What impact has the child's experience had on their

- sense of identity, physical, mental and emotional health, education, key relationships and friendships, leisure and enjoyment of life?
- How is the child's life affected by factors of culture, ethnicity, disability, gender and sexuality? How should we respond in our interventions?
- → What will the child's life be like if things don't improve? Based on what we know about the child and on good quality research, what will be the enduring impact on them of their life experiences so far?
- What changes need to happen to improve things to an acceptable level?
- → What are the strengths in the child's life, relationships and networks that will help make the changes? What are the things that will impede progress?
- What help do we need to provide to make the

- necessary changes?
- → How will we know that the necessary changes have been achieved or that they won't be achieved within the child's timescale? If change can't be achieved quickly enough, or efforts to achieve change fail, what is our contingency plan?

This appears a long list, but in reality analysis can often be written succinctly. There is overlap between the questions, and it's possible to refer back to information gathered, for example by writing 'it is clear from the events described above in section 3 that...'

Precision in developing your analysis will help you write a good C-SMART plan. We will know what needs to change and why; what we are going to do to create that change; the timescales for change; and what we will do when if things don't work out.



An analogy

When we develop a health problem, we want the doctor to ask us questions, examine us, if necessary carry out some tests and then tell us what is wrong. But we want them to do more than that. We want them to provide an analysis. Is it serious? Can it be resolved? What are the treatment options? What is the prognosis? That is the analysis. Without that, simply knowing what is wrong is not much

help.

Structuring your analysis

When it comes to formulating and writing your analysis, it helps to have a clear structure. I suggest two broadly similar approaches. The first is an adaptation of Ofsted's approach to assessing and analysing performance of those they inspect. This is summarised as "judgement – evidence – impact", though in relation to

children's assessments is better described as "opinion – evidence – impact". The second is what school children are often taught about structuring an argument: "point – evidence – explanation". To each of these we can add intervention: what do we need to do to improve things?

Opinion – evidence – impact – intervention; (or point – evidence – explanation intervention)

- → State your opinion (make your point), for example: 'This child has suffered harm through neglect and is at risk of further harm if she remains with her parents. That harm is likely to include significant physical and mental health problems such as ...'
- Indicate how you know this: what is the evidence? "Health professionals report that she is underweight for her age, her speech is delayed and her parents have not kept a number of important medical appointments. School staff report she has had repeated problems with head lice infestations that have gone untreated. She is often unwashed and smelly and other children avoid her as a result. She is frequently tired and hungry. Parents are often late to collect her. In completing a single

assessment I have found that the parents do not provide enough routine or stimulation: the child is often still up late at night; she does not have regular meals, and these are often missed; there is often little or no food in the house: she spends long periods watching television with no interaction with parents. She tells me that she hates it when her dad drinks too much because he swears at her and sometimes hits her mum. She says this makes her frightened. She feels lonely at school because the other children call her names and won't play with her. She would love to do gymnastics and asked her parents but they haven't done anything about it."

→ What is the impact on the child so far? What is the future impact likely to be if things don't change? What is a day in the child's life like for her? When evaluating this, it is helpful to refer to GCC's impact cards. In considering future impact, it is useful to refer to research. It is also important to consider where the actual and likely impact line up against our threshold criteria for child in need and child protection. The following is an outline of the sorts of things that might be included here. It is illustrative only and



not exhaustive. It is likely that a careful consideration of actual and likely impact will be longer and more detailed.

"This is a little girl who appears to be sad and anxious. There are times she feels unsafe at home. Her social development is being impaired as the lack of hygiene has prevented her from making friends at school. The lack of interaction with her parents and her speech delay add to a sense of isolation. Her school progress is suffering and she finds it difficult to concentrate on tasks in hand, possibly because of the tiredness and hunger. We know from research that early and

repeated exposure to neglect and domestic abuse can lead to depression and ... in later life."

→ Intervention: what do we need to do to prevent further harm? This part of the analysis will give you the outline of the plan, whether child in need, child protection or care plan. Say what is needed to eliminate the circumstances that are leading to the harm.

Summary

Assessment is more than information-gathering and a description of a child's circumstances. It must include analysis, which is the understanding of what the child's

circumstances and experiences mean for safety, their day to day life and their future, as well as what needs to happen to improve matters.

A good analysis within an assessment will make the drafting of a plan for the child simpler as it will link the child's circumstances and their impact with action to improve their life. Investing time in analysis will lead to better plans that are C-SMART, enabling us to measure progress and decide when alternative responses are needed, for example when we conclude that a child protection plan is not delivering enough change in good time and so we need to enter PLO.



The impact of...domestic abuse

Everyone is different and will respond differently to difficult experiences. Research* shows us though that children and young people who experience too much arguing, aggression, violence and controlling behaviours in the home struggle with the following if they do not have enough protections in their lives:

Body

- getting hit or hurt by adults
- feeling sick, stomachaches, headaches and other pains
- bed-wetting, nightmares or difficulty sleeping
- so stressed that it's getting in the way of normal brain and body development

Thoughts & Feelings

- > scared and worried
- unhappy, sad, low, flat
- grumpy and angry
- → going over difficult things at home in my mind again and again
- > thinking about people in my family members being sad or hurt
- > finding it hard to concentrate and focus
- > thinking about hurting myself or others
- → find it difficult to understand others' feelings (empathy)
- → fear of being alone struggling to learn

Behaviours & Relationships

- → I find it difficult to connect to mum and/ or dad (attachment - which effects my social, physical, emotional and intellectual development)
- → I need to look for people's attention
- it's not easy to relate to people
- → I might seem 'shut-down' or locked away in my own world
- → I use violence to solve problems
- → I can have tantrums
- → I sometimes act younger than I am
- → I am copying behaviours I've seen at the home
- When adults are fighting I try to get involved to stop it
- When I feel scared I'm quite jumpy

- → I'm avoiding school
- → I have difficulty making good friends
- → I take too many risks
- → I'm getting into trouble too often at home or in my community
- I might start (or already have started) using alcohol or drugs
- > I have problems with eating
- I'm not practicing safe sex and am at risk of sexual infections or teenage pregnancy
- → I prefer to keep to myself and be on my own
- I am doing things to harm myself
- → I choose partners who don't treat me well, and/or who I might not treat well – I'm repeating a cycle

It's important to remember that when children face too much arguing, violence, aggresion and controlling behaviours in the home on top of other difficulties (like parents struggling with their thoughts and feelings, parents using drugs or alcohol inappropriately, criminal behaviours in the family, poverty) the impact can be much greater.

^{*} Research from: 'Preventing child abuse and neglect: Domestic Abuse: Signs – Symptoms – Effects' (NSPCC); 'Domestic Violence and Abuse – the impact on children and adolescents' (Royal College of Psychiatrists); 'Behind Closed Doors: the impact of domestic abuse on children' (UNICEF).





Everyone is different and will respond differently to difficult experiences. Research* shows us though that children and young people who are not coping when their parents have significant struggles with thoughts and feeling can be effected with the following if they do not have enough protections in their lives:

Body

- As an unborn baby my mother's stress could damage my brain and body development
- → I could be born too early and have a low birth weight
- > I could have difficulty sleeping
- → Too much stress could get in the way of my body and brain developing as they should
- I might not have my needs met when mum or dad is struggling
- I could be hit, hurt or mistreated

Thoughts & Feelings

- → I feel irritable and grumpy
- I'm scared and worried about my mum or dad
- → I feel unhappy, sad, low, flat
- → I feel worried about how mum or dad is acting or what they're doing
- → I feel embarrassed or ashamed of my mum or dad
- → I find it hard to concentrate and focus
- → I think that my own thoughts and feelings aren't important
- → I think I'm to blame for my family's struggles
- → I don't really know how to respond when things are always changing
- → I worry that I'll develop the same struggles with my own thoughts and feelings
- → I am struggling with my thoughts and feelings
- → I don't always feel sure about my relationship

Behaviours & Relationships

- → I have difficulty connecting to mum and/ or dad (attachment – which can effect my social, physical, emotional and intellectual development)
- My behaviour is sometimes muddled or difficult for others
- → I take on too much of a caring role in the family. This can mean I have fewer friends, or me playing less, or it sometimes gets in the way of my school work
- → I'm being teased or bullied by others
- → I can be too physically aggressive
- → When mum or dad is struggling, we sometimes don't have enough money to make ends meet
- → I prefer to keep to myself and be on my own
- → I find it hard to talk about what's happening
- → I struggle with school
- I'm getting into trouble too often at home or in my community

It's important to remember that when children and young people have parents who are significantly struggling with their thoughts and feelings on top of other difficulties (like aggression and violence in the home, parents using drugs or alcohol inappropriately, criminal behaviours in the family, poverty) the impact can be much greater.

^{*} Research from: 'Preventing child abuse and neglect: Impact of parental mental ill health on children' (NSPCC); 'Parental mental health problems' (RiP); Parental mental illness: the mpact on children and adolescents' (Royal College of Psychiatrists); 'Parental mental health and child welfare' (SCIE); 'Think child, think parent, think family' (SCIE).



The impact of...parental substance misuse

Everyone is different and will respond differently to difficult experiences. Research* shows us though that children and young people whose parents have significant struggles with alcohol and/or drugs can be effected with the following if they do not have enough protections in their lives:

Body

- As an unborn baby, my mother's use of alcohol/drugs could damage my brain and body development
- → I could be born too early and have a low birth weight
- → I could have difficulty sleeping
- > I could be hit, hurt or mistreated
- I might not have my needs met when mum or dad is struggling
- → I could become very unwell if I have any alcohol or drugs in my body

Thoughts & Feelings

- → I feel irritable and grumpy
- → I'm scared and worried about my mum or dad
- → I feel unhappy, sad, low, flat
- → I feel worried about how mum or dad is acting or what they're doing
- → I feel embarrassed or ashamed of my mum or dad
- → I'm not getting as much stimulation as I need to grow
- I find it hard to concentrate and focus
- → I think I'm to blame for mum or dad's struggles
- → I'm not always sure about my relationship with mum or dad

Behaviours & Relationships

- → I'm learning unhealthy ways of coping and how to look after my own children one day
- → I find it difficult to connect to mum and/ or dad (attachment - which effects my social, physical, emotional and intellectual development)
- → I'm being teased or bullied by others
- My behaviour is sometimes muddled or difficult for others
- → I have problems in my relationships with others
- → I don't have a good routine
- I am at risk of accidents in the home if mum or dad isn't able to look after me
- → I take on too much of a caring role in the family. This can mean I have fewer friends, or me playing less, or it sometimes gets in the way of my school work

- → When mum or dad is struggling, we sometimes don't have enough money to make ends meet
- I am being exposed to harmful substances, drugs equipment, criminal activity and unsuitable people
- → I don't see as much of my mum or dad as I would like
- → I struggle with school
- I might start (or already have started) using alcohol or drugs
- → I'm getting into trouble too often at home or in my community
- → I don't expect much from my mum or dad
- → I can be too physically aggressive
- → I prefer to keep to myself and be on my own

It's important to remember that when children and young people have parents who are significantly struggling with alcohol and/or drugs, on top of other difficulties (like aggression and violence in the home, parents struggling with thoughts and feelings, criminal behaviours in the family, poverty) the impact can be much greater.

^{*} Research from: 'Parental drug and alcohol misuse' (Joseph Rowntree Foundation); 'Parental alcohol misuse and children' (Parliamentary Office of Science and Technology); 'Preventing child abuse and neglect: Parental substance misuse' (NSPCC); 'The impact of parental substance misuse on child development' (RiP); 'The impacy of parental substance misuse' (The Children's Society).





Everyone is different and will respond differently to difficult experiences. When these affect us, it usually happens in 3 areas: our bodies, our thoughts and feelings, and our behaviours and relationships.

My body

(e.g. eating, sleeping, illness, injury, growth & development)

Actual impact (evidence)

Anticipated impact (professional knowledge & judgement)

My thoughts & feelings

(e.g. thoughts, feelings, learning, cognitive ability)

Actual impact (evidence)

Anticipated impact (professional knowledge & judgement)

My behaviours & relationships

(e.g. behaviours, interactions, relationships, family dynamics).

Actual impact (evidence)

Anticipated impact (professional knowledge & judgement)

A day in my life...

(thinking about the above, what is a day in your life like?)

Actual impact (evidence)

Anticipated impact (professional knowledge & judgement)



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