



NHS Greater Glasgow & Clyde Community Children's Services

Karen McFadden

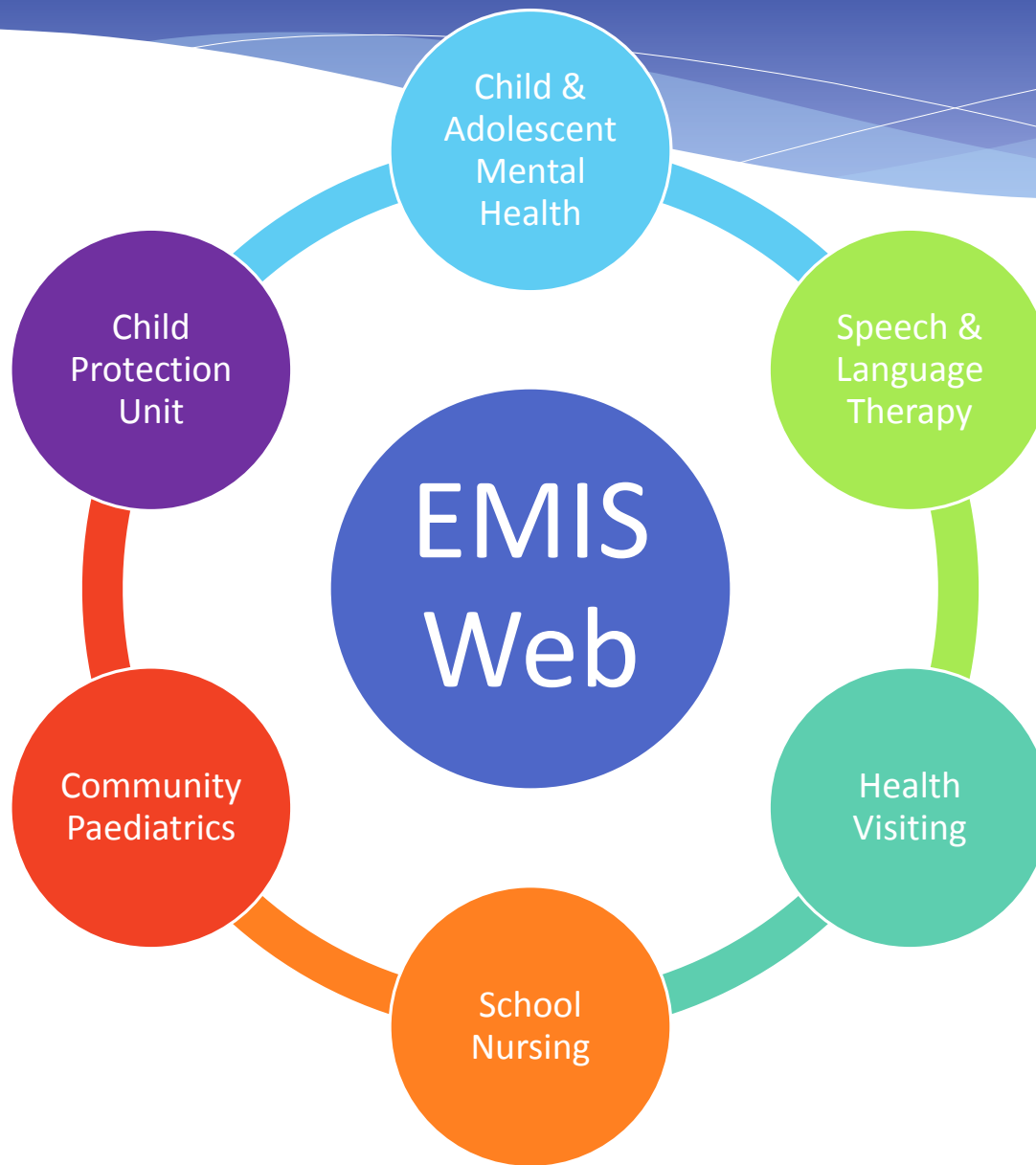
Presentation Contents

- Programme Overview
- EMIS Web overview
- What goes in can't always come out
- What have we done so far
- Future possibilities

Aim of the Programme

Key Objectives

- 'Single shared record' for community based children's services
- Support seamless transitions between and within services
(Health Visitor to School Nurse, Paediatrician to Physio, CAMHS Community case manager to Psychiatric Inpatient case manager)
- Improve current communication difficulties between disciplines
- Streamline data entry so that information is only asked for, and entered once and provide improved statistics
- Cease creation of paper records
- Support access to care record at site of delivery through the implementation of agile working on 3g/4g laptops and tablets.
- Support improving co ordination of services and service user satisfaction and most importantly improved clinical outcomes
- Improve communication to Primary Care, Acute and Partner agencies



Single Shared Record Benefits

- All community children's services information can be found in one place
- Clinicians are able to instantly update and share data
- Improve communication & coordination between disciplines
- Easier to identify vulnerability
- Multi-disciplinary significant event chronology
- Single record of non-attendance
- Organisation wide alerts and warnings
- Single care planning structure

EMIS Overview



MCLUSKEY, Thomas (HealthVisitor)

Health Visiting (08:00-18:00)

Time	Description / Patient Name
08:00	
08:30	
09:00	Home Visits
09:30	Home Visits
10:00	Home Visits
10:30	Home Visits
11:00	Home Visits
11:30	Home Visits
12:00	
12:30	
13:00	Clinic
13:30	Clinic
14:00	Clinic
14:30	Clinic
15:00	Clinic
15:30	Home Visits
16:00	Home Visits
16:30	Home Visits

Quick Launch Menu

Care Record

- Summary
- Medication
- Consultations
- Investigations

Workflow

- Workflow Manager

Appointments

- Appointment Book
- Planner

Registration

- Registration

Reporting

- Population Reporting

Organisation Notepad

MCFADDEN, Karen - Health Visitor (HV), 25-Mar-2014 08:44

The National Practice Model EMIS Guidance has been added to the staff net site.

DAVID, Norman (Dr), 01-Jun-2012 12:11

Next Team Meeting is on 10th August (Agenda will be e-mailed out)

EMIS Support - Latest news

[QOF searches/GPES extracts for 10 December](#)

QOF searches may not have run last night for your practice. This was caused by an issue with running the GPES Rotavirus/Dementia extracts. The QOF searches will not be scheduled to run tonight to allow these GPES extracts to complete. They will be scheduled to run Thursday evening and the updated QOF figures will be available for you on Friday morning.

[Incorrect transaction number in Registration WF](#)

Since EMIS Web 4.11, new transactions in Registration Workflow are not being counted in the task counter. The transactions themselves are

BBC News - Health

[Superbugs to kill 'more than cancer'](#)

Thu, 11 Dec 2014 00:29:22 GMT



Drug resistant infections will kill an extra 10 million people a year worldwide by 2050 unless action is taken, a study says.

[Scientists make 'feel full' chemical](#)

Thu, 11 Dec 2014 00:29:41 GMT



Scientists have created a chemical that can be added to food to make people feel fuller.

What goes in.....

- Requirements for data key consideration at preparation for implementation stage
- Data Extract
- Population Reporting Module
- Patient Administration, Appointment book, Care Record
- Clinical templates, Coding,

CAMHS Data and Business Objects

BUSINESSOBJECTS INFOVIEW

Navigation pane showing folder structure:

- All
 - My Favorites
 - Inbox
 - Public Folders
 - EMIS Children Reports
 - CHcP
 - Data Quality
 - Mental Health Reporti

Search title: [] of 2+

Title	Type
CHcP	Folder
Data Quality	Folder
Attended & DNA appointments	Web Intelligence Report
CAMHS Referral Exclusion	Web Intelligence Report
Cancelled appointments	Web Intelligence Report
Contacts with no referral	Web Intelligence Report
Emis Weekly Report 4.0	Web Intelligence Report
Full patient history	Web Intelligence Report
ISD measures 2.0 - Referral to Choice (waiting)	Web Intelligence Report
ISD measures 2.1 - Referral to Choice (experienced)	Web Intelligence Report

Total: 17 objects

BUSINESSOBJECTS INFOVIEW

Home | Document List | Open | Send To | Dashboards

Help | Preferences | About | Log Out

New | Add | Organize | Actions

Search title | 2 of 2

- All
- My Favorites
- Inbox
- Public Folders
 - EMIS Children Reports
 - Mental Health Reports

Title	Type
ISD measures 3.0 - Choice to Partnership (waiting)	Web Intelligence Report
ISD measures 3.1 - Choice to Partnership (experienced)	Web Intelligence Report
ISD measures 4.0 - Referral to Treatment (waiting)	Web Intelligence Report
ISD measures 4.1 - Referral to Treatment (experienced)	Web Intelligence Report
Non Actualised appointments	Web Intelligence Report
PatientContacts	Web Intelligence Report
Referrals	Web Intelligence Report

Total: 17 objects

User Prompt Input

Advanced Run

01. Select Report Start Date
01/04/2015 00:00:00
dd/MM/yyyy

02. Select Report End Date
30/04/2015 23:59:59
dd/MM/yyyy

Select organisation(s): (optional)



EMIS Web reports

Summary of appointments for West CAMHS;West Dunbartonshire CAMHS;Inverclyde CAMHS;North CAMHS;East CAMHS;East Renfrewshire CAMHS;South CAMHS;Renfrewshire CAMHS between 01/04/2015 and 30/04/2015

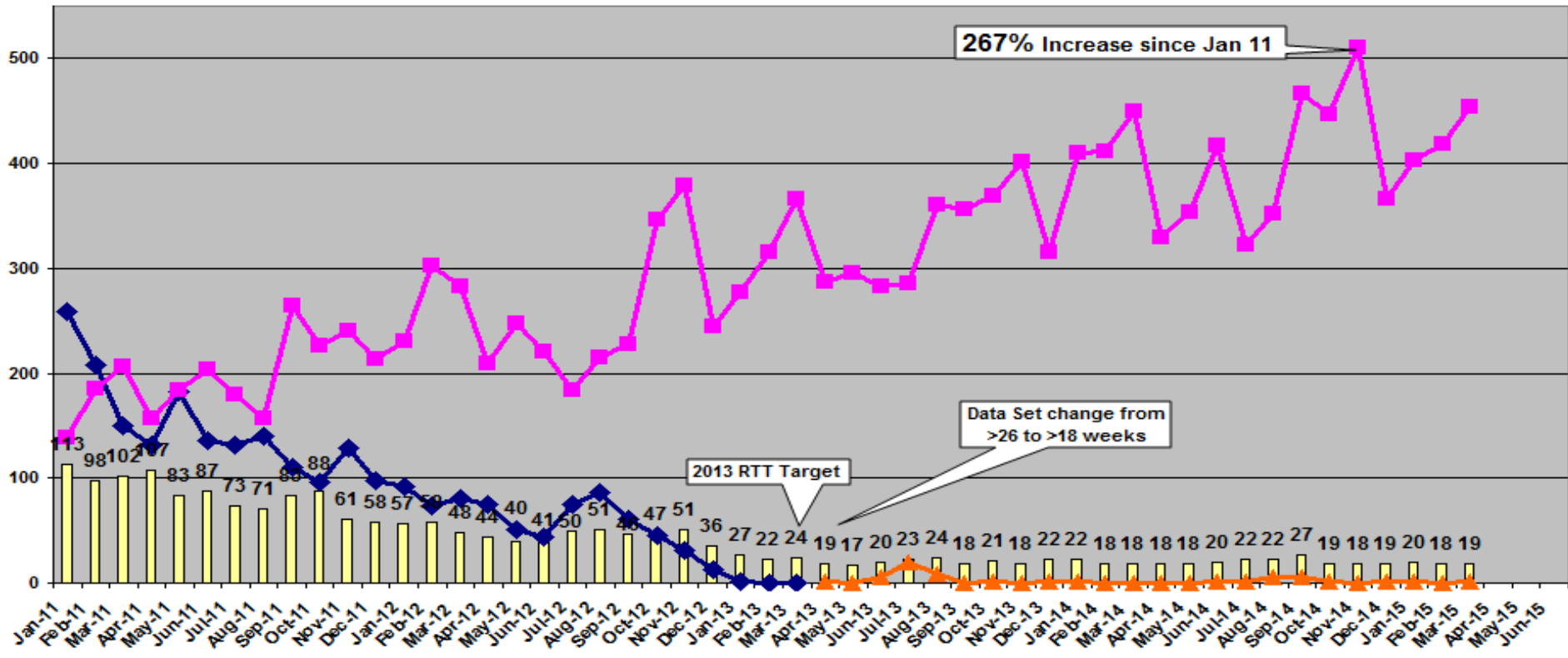
	Arrived	DNA	Left	Send In	Telephone - Complete	Telephone - Not In	Total
Accompanying other Clinician (Joint Consultation)		11	52				63
Assessment			1				1
Assessment/Treatment	1						1
Autism Assessment			1				1
cancellation		1					1
Choice		79	334				413
Choice/Partnership		2	13				15
Default		6	21				27
Emergency			3				3
Hospital Visit			1				1
Indirect Support Activity		1	28				29
Partnership		53	203				256
Professional Meeting			4				4
Return	1	524	2,253	13			2,791
School Meeting			5				5
School Observation		1	2	1			4
Telephone consultations					13	2	15
Urgent			1				1
Total	2	678	2,922	14	13	2	3,631

CAMHS Tier 3 Waiting Times

Locality	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15
North	16	14	18	13	17	14
South	15	17	12	13	13	14
East	18	18	18	18	17	17
West	13	11	13	9	13	11
West Dun	17	11	15	11	14	16
Renfrewshire	16	17	17	17	17	17
Inverclyde	27	19	18	19	17	17
East Renfrewshire	17	18	18	17	20	18
Longest	27	19	18	19	20	18

RTT Progress - CAMHS Greater Glasgow and Clyde

■ Longest Wait RTT
 ◆ Waiting > 26 weeks
 ▲ Waiting > 18 weeks
 ■ Accepted Referrals



CAMHS Outcome Research Consortium (CORC) Data

Summary Consultations Medication Problems Investigations Care History Diary Documents Referrals Growth Charts Care Plans Assessments New Consultation

Save Next Problem Confidentiality Sharing

26-May-2015 13:39
USER, Clinician (Mr)
Face to face consultation
Greater Glasgow and Clyde Childrens Services

Run Template Book Appointment Create Task Medication Regime Review Spell check

Print Configure Search

Tasks - 10 (5)

Active MOUSE, Alexandria -Minnie- (Miss) Born 01-Apr-2012 (3y 1m) Gender Female EMIS No. 4324 Usual GP STEVENSON, (Dr)

C GAS / DDC GAS

Pages

C-GAS

C-GAS position at closure

DD-CGAS

70 - 61 **Some difficulty in single area** but generally functioning pretty well (e.g. sporadic or isolated antisocial acts, such as occasionally playing hooky or petty theft: consistent minor difficulties with school work; mood changes of brief duration; fears and anxieties which do not lead to gross avoidance behaviour, selfdoubts); has some meaningful interpersonal relationships; most people who do not know the child well would not consider him/her deviant but those who do not know him/her well might express concern.

60 - 51 **Variable functioning with sporadic difficulties or symptoms** in several but not all social areas; disturbance would be apparent to those who encounter the child in a dysfunctional setting or time but not to those who see the child in other settings.

50 - 41 **Moderate degree of interference in functioning** in most social areas or severe impairment or functioning in one area, such as might result from, for example, suicidal preoccupations and ruminations, school refusal and other forms of anxiety, obsessive rituals, major conversion symptoms, frequent anxiety attacks, poor or inappropriate social skills, frequent episodes of aggressive or other anti-social behaviour with some preservation of meaningful social relations.

40 - 31 **Major impairment in functioning** in several areas and unable to function in one of these areas, is, disturbed at home, at school, with peers, or in society at large, e.g. persistent aggression without clear instigation; markedly withdrawn and isolated behaviour due to either mood or thought disturbance, suicidal attempts with clear lethal intent; such children are likely to require special schooling and/or hospitalisation or withdrawal from school (but this is not a sufficient criterion for inclusion in this category).

30 - 21 **Unable to function in almost all areas** e.g. stays at home, in ward, or in bed all day without taking part in social activities or severe impairment in reality testing or serious impairment in communication (e.g. sometimes incoherent or inappropriate).

20 - 11 **Needs considerable supervision to prevent hurting others** and self (e.g. frequently violent, repeated suicide attempts) or to maintain personal hygiene or gross impairment in all forms of communication, e.g. severe abnormalities in verbal and gestural communication, marked social aloofness, stupor, etc.

10 - 1 **Needs constant supervision (24 hour care)** due to severely aggressive or self-destructive behaviour or gross impairment in reality testing, communication, cognition, affect or personal hygiene.

The Children's Global Assessment Scale was adapted from the Global Assessment Scale for Adults (Shaffer, D; Gould, M; Brasic, J; Ambrosini, P; Fischer, P; Bird, H; Aluwahlia, S. A Children's Global Assessment Scale (CGAS). Arch. Gen. Psychiatry, 1983, 40:1228-1231

Please enter the score in the box below.

Children's global assessment scale 26-Jan-2015 32

26-May-2015

Text

Summary

Latest Contacts

MOUSE, Alexandria (Miss)

HPI - Additional (Low Risk)

CORC – CGAS – All – 2 Time Points Auto Report

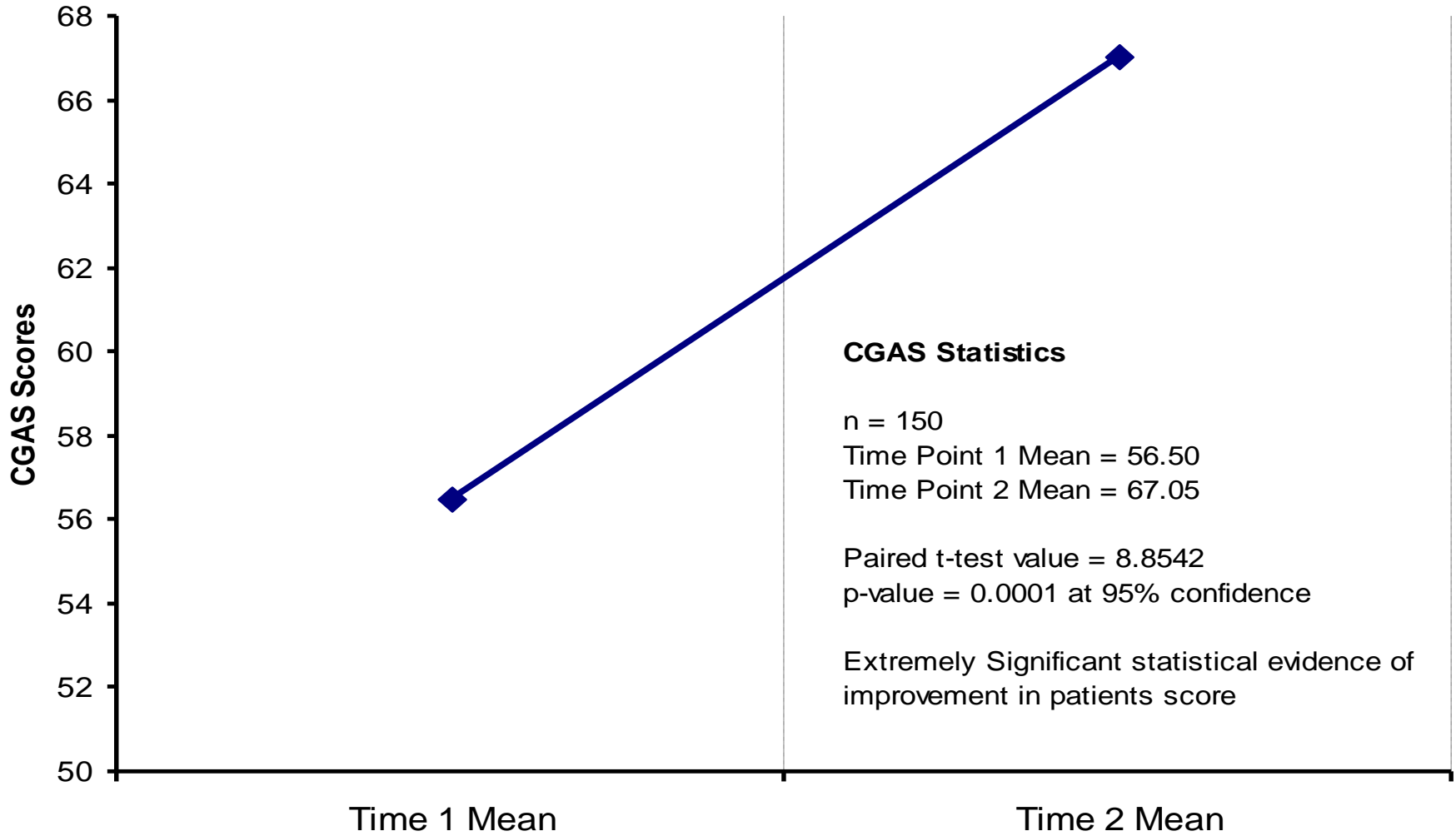
Parent Population: CORC - CGAS - All - 2 Time Points

Last Run: 27-Apr-2015 09:40 Relative Date: 27-Apr-2015 09:40

Patient Count	Males	Females
142	49	93

Patient Details					Consultations			
EMIS Number	Full Name	Age	Gender	Postcode	Date	Clinical Codes' Clinical Code	Clinical Codes' Value	Full Name of the User Details of the Clinical Codes
82		18	Male	G11 7DD	03-Sep-2014	Children's global assessment scale	70	MURPHY, Kirsty (Miss)
					27-Oct-2014	Children's global assessment scale	85	MURPHY, Kirsty (Miss)
176		17	Female	G12 0DQ	04-Feb-2015	Children's global assessment scale	50	MILLIGAN, Kirsty (Ms)
					27-Mar-2015	Children's global assessment scale	61	MILLIGAN, Kirsty (Ms)
703		16	Female	G76 7DP	19-Jan-2015	Children's global assessment scale	58	DEERY, Nicole (Miss)
					17-Mar-2015	Children's global assessment scale	70	DEERY, Nicole (Miss)
1196		18	Female	G43 2DX	07-May-2014	Children's global assessment scale	41	CUSHLEY, Teresa (Miss)
					25-Jul-2014	Children's global assessment scale	70	FARQUHAR, Laura (Ms)
1467		18	Female	G76 8HX	08-Jan-2015	Children's global assessment scale	63	WATT, Jaclyn (Miss)
					15-Apr-2015	Children's global assessment scale	100	WATT, Jaclyn (Miss)
1510		17	Female	G76 7BN	12-Dec-2014	Children's global assessment scale	70	MILLIGAN, Kirsty (Ms)
					20-Dec-2014	Children's global assessment scale	70	MILLIGAN, Kirsty (Ms)
					05-Feb-2015	Children's global assessment scale	65	MILLIGAN, Kirsty (Ms)
					27-Mar-2015	Children's global assessment scale	70	MILLIGAN, Kirsty (Ms)
1581		16	Female	G46 6AX	12-Oct-2014	Children's global assessment scale	51	WATT, Jaclyn (Miss)
					24-Oct-2014	Children's global assessment scale	81	WATT, Jaclyn (Miss)
1790		16	Female	G78 3HX	22-May-2014	Children's global assessment scale	41	HUTTON, Nicola (Ms)
					15-Aug-2014	Children's global assessment scale	46	HUTTON, Nicola (Ms)
					21-Oct-2014	Children's global assessment scale	42	HUTTON, Nicola (Ms)
					28-Nov-2014	Children's global assessment scale	55	HUTTON, Nicola (Ms)

Average CGAS Scores - All CAMHS



Speech and Language Therapy Microstrategy and Population Reporting

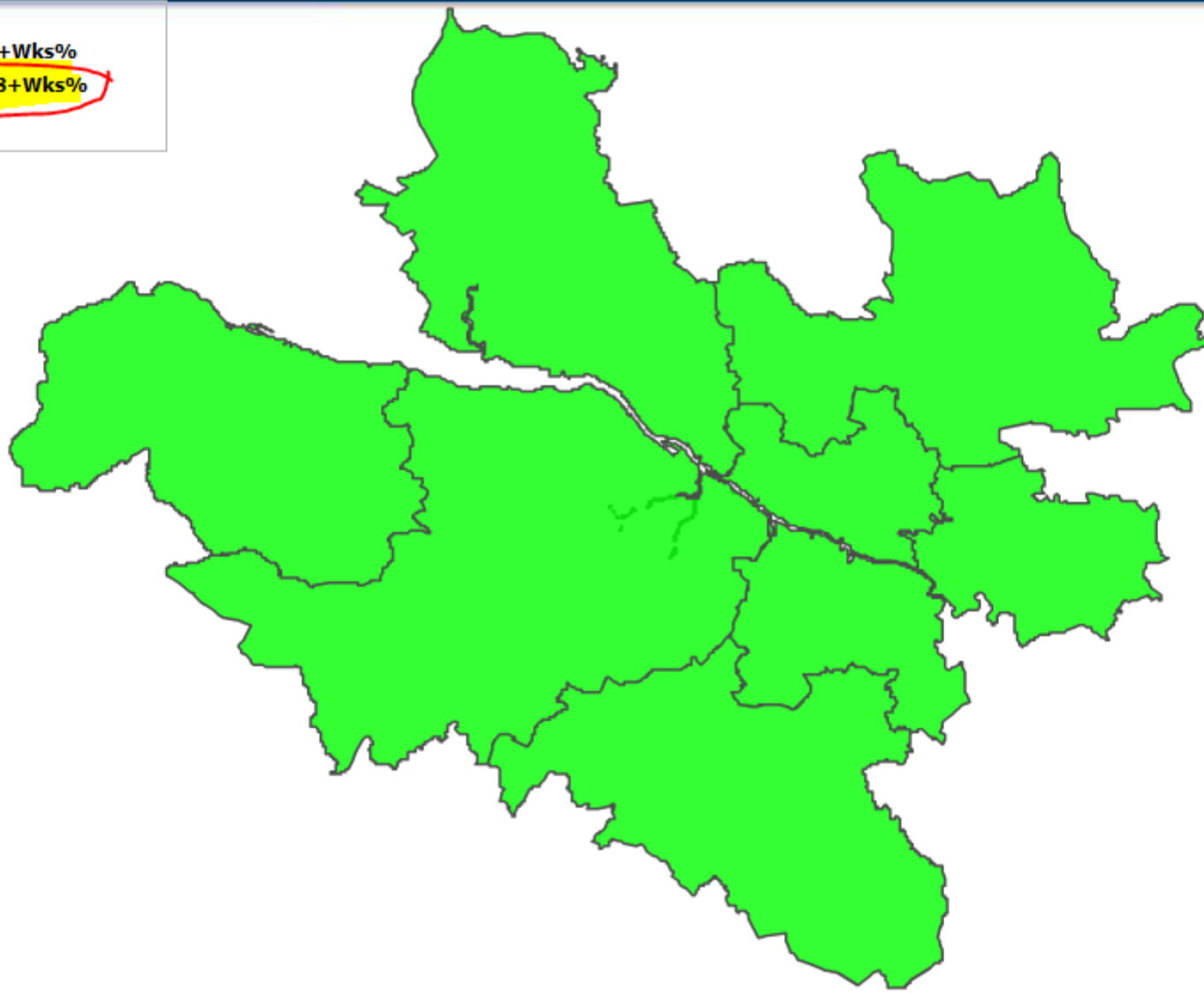


Greater Glasgow & Clyde

[Guide](#)

Patients Waiting

- Treatment Over 18+Wks%
- Appointment Over 8+Wks%

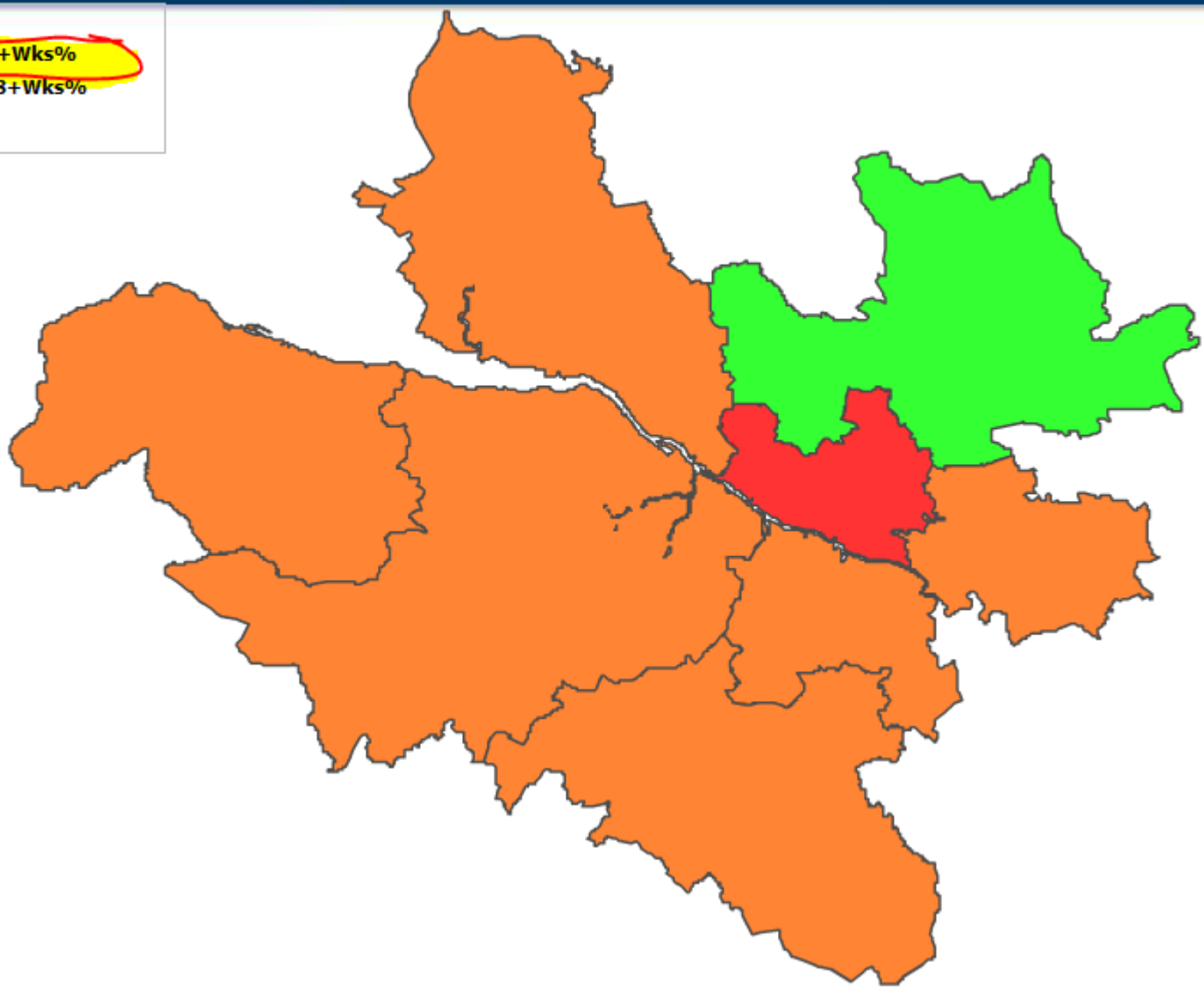




Greater Glasgow & Clyde

[Guide](#)

- Patients Waiting**
- Treatment Over 18+Wks%
 - Appointment Over 8+Wks%



Report Name: SLT East Ren - Autism Auto Report

Parent Population: SLT East Ren - Autism

Last Run: 08-May-2015 15:54

Relative Date: 08-May-2015 15:54

Patient Count: 22

Males: 18

Females: 4

Population Report

Shows patients referred to East Ren SLT in 2015
who have an Autism or Asperger's diagnosis

Patient Details					Clinical Codes		Referrals
EMIS Number	Full Name	Age	Date of Birth	Gender	Date	Code Term	Target's Service
		18	03-May-1997	Male	06-Jan-2015	[X]Asperger's syndrome	GGC East Renfrewshire SLT
		5	30-Sep-2009	Male	14-Jan-2015	[X]Autistic disorder	GGC East Renfrewshire SLT
		10	09-Jan-2005	Male	14-Jan-2015	[X]Autistic disorder	GGC East Renfrewshire SLT
		5	21-Jan-2010	Male	08-Jan-2015	[X]Childhood autism	GGC East Renfrewshire SLT
		12	02-Dec-2002	Female	24-Mar-2015	[X]Autistic disorder	GGC East Renfrewshire SLT
		4	18-Jun-2010	Male	08-Jan-2015	[X]Childhood autism	GGC East Renfrewshire SLT
		5	08-Jan-2010	Male	08-Jan-2015	[X]Childhood autism	GGC East Renfrewshire SLT
		5	15-May-2009	Male	14-Jan-2015	[X]Autistic disorder	GGC East Renfrewshire SLT
					14-Jan-2015	[X]Childhood autism	
		6	15-Mar-2009	Female	14-Jan-2015	[X]Childhood autism	GGC East Renfrewshire SLT
		5	09-Jun-2009	Male	14-Jan-2015	[X]Childhood autism	GGC East Renfrewshire SLT
		7	26-Oct-2007	Male	14-Jan-2015	[X]Childhood autism	GGC East Renfrewshire SLT
		5	02-Sep-2009	Female	14-Jan-2015	[X]Autistic disorder	GGC East Renfrewshire SLT
		6	02-Nov-2008	Male	14-Jan-2015	[X]Childhood autism	GGC East Renfrewshire SLT
		5	28-Aug-2009	Male	14-Jan-2015	[X]Autistic disorder	GGC East Renfrewshire SLT
		7	11-May-2007	Male	24-Mar-2015	[X]Autistic disorder	GGC East Renfrewshire SLT
		5	18-Oct-2009	Male	08-Jan-2015	[X]Childhood autism	GGC East Renfrewshire SLT
		5	16-Jun-2009	Male	14-Jan-2015	[X]Childhood autism	GGC East Renfrewshire SLT
		14	26-May-2000	Female	31-Mar-2015	[X]Asperger's syndrome	GGC East Renfrewshire SLT
		3	13-May-2011	Male	07-Apr-2015	[X]Childhood autism	GGC East Renfrewshire SLT
							GGC East Renfrewshire SLT
		3	13-May-2011	Male	07-Apr-2015	[X]Childhood autism	GGC East Renfrewshire SLT
							GGC East Renfrewshire SLT
		6	29-May-2008	Male	14-Jan-2015	[X]Childhood autism	GGC East Renfrewshire SLT
		3	19-Feb-2012	Male	19-Mar-2015	[X]Childhood autism	GGC East Renfrewshire SLT

Children's Services Key Performance Indicators

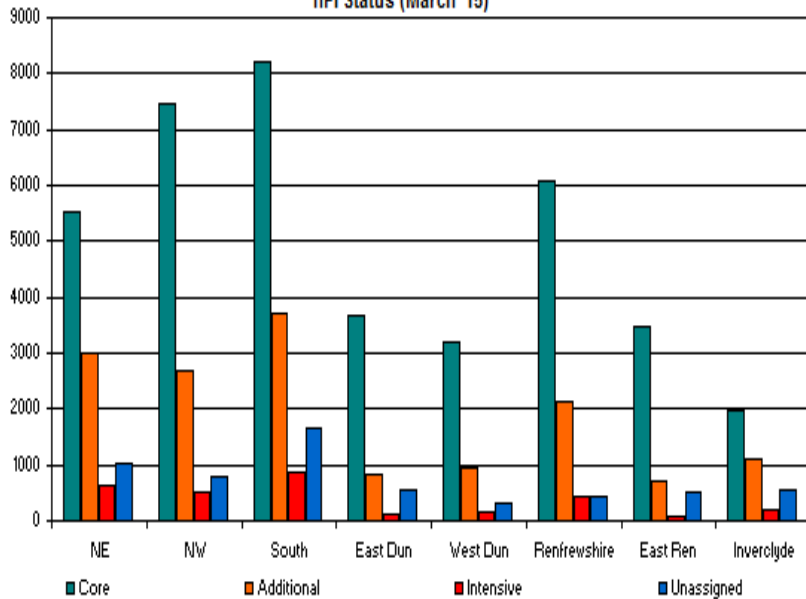
KPI's

- * **KPI 1** – Number and % of HPI's allocated by Health Visitor within 24 weeks
- * **KPI 1.1** – Number/% of Core HPI's assigned by Locality
- * **KPI 1.2** – Number/% of Additional HPI's assigned by Locality
- * **KPI 1.3** – Number/% of Intensive HPI's assigned by Locality
- * **KPI 1.4** – Number/% of Unallocated HPI's by Locality
- * **KPI 2** – Average Number of Children on Caseload per member of Staff
- * **KPI 3** - % of all children within each Community Planning Partnership who have reached all of the expected developmental milestones at the time of the child's 27-30 month child health review
- * **KPI 4** - Number/% of children with improved outcomes after receiving service
- * **KPI 5** - Number of assessments completed (*Currently only applicable to SCS*)
- * **KPI 6** - Waiting times for receiving a service (*only applicable to SCS*)
- * **KPI 7** – “Did Not Attend” Appointment Rates (*Currently Only Applicable to CAMHS*)
- * **KPI 8** – Number of Complaints Received and % Upheld
- * **KPI 9** – % of Staff with an e-KSF Review Undertaken and PDP in Place
- * **KPI 10** – Staff Sickness Absence Rate by Service
- * **KPI 11** – Staff Turnover Rate/Vacancy Rate by Profession & Service

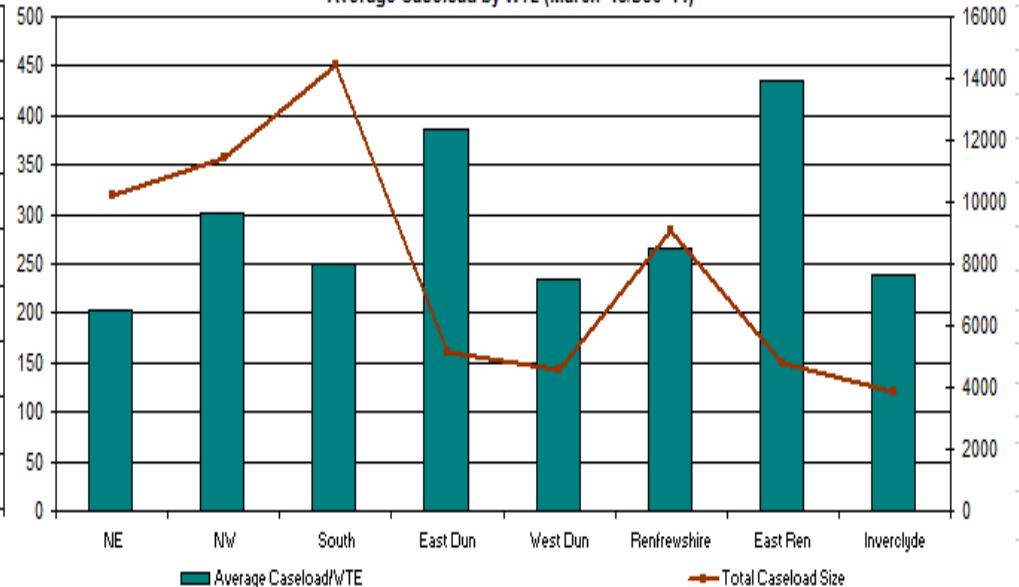
KPI Dashboard (March 2015)

Health Visiting Services

HPI Status (March '15)



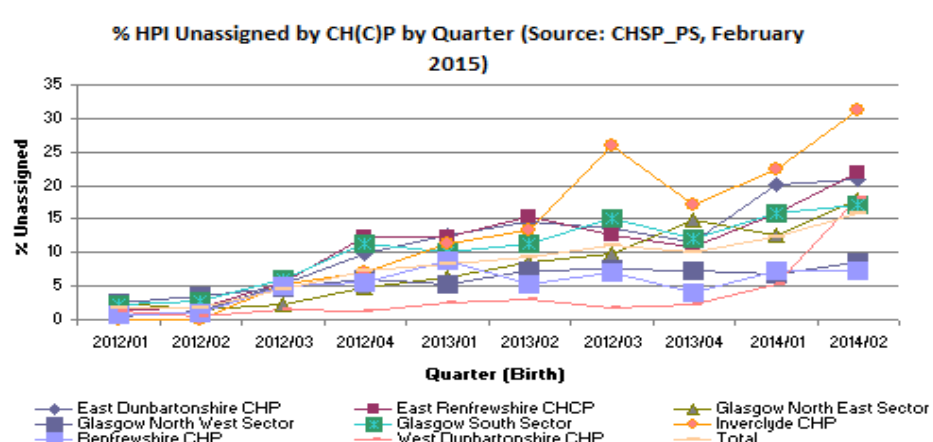
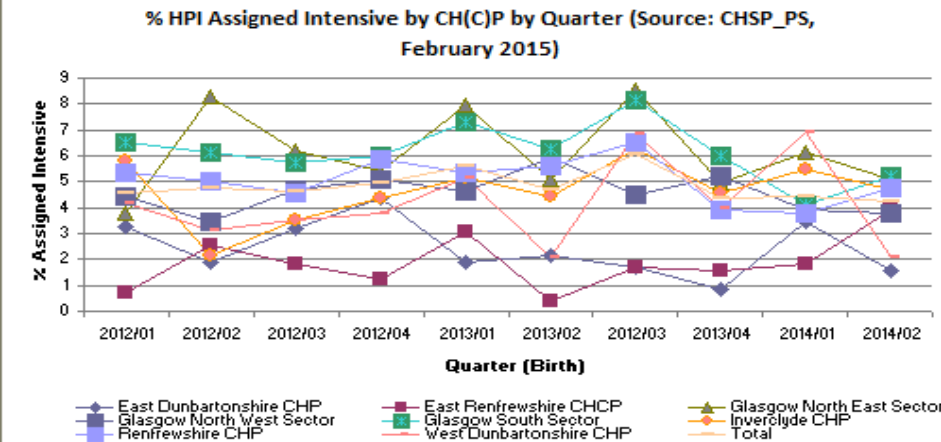
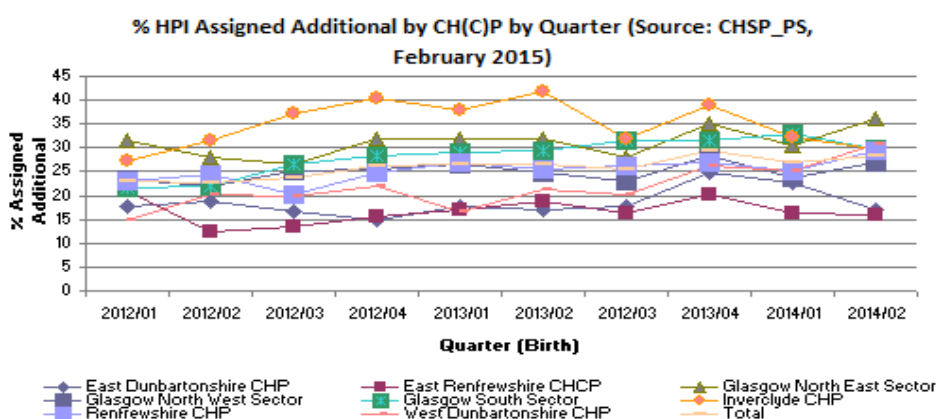
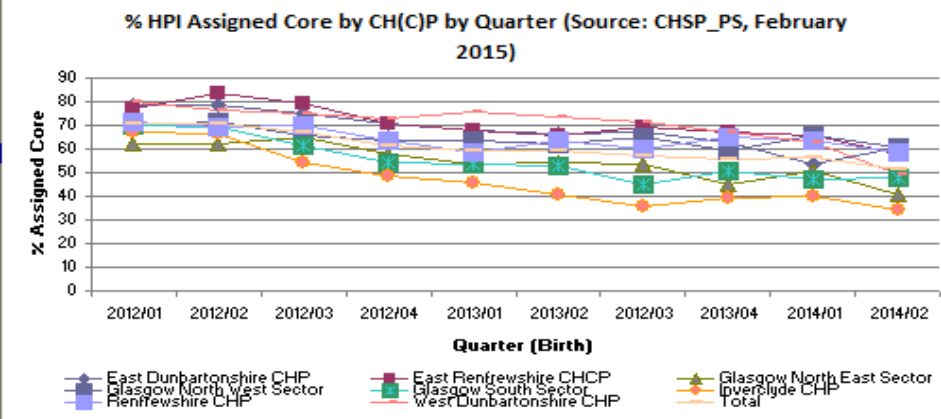
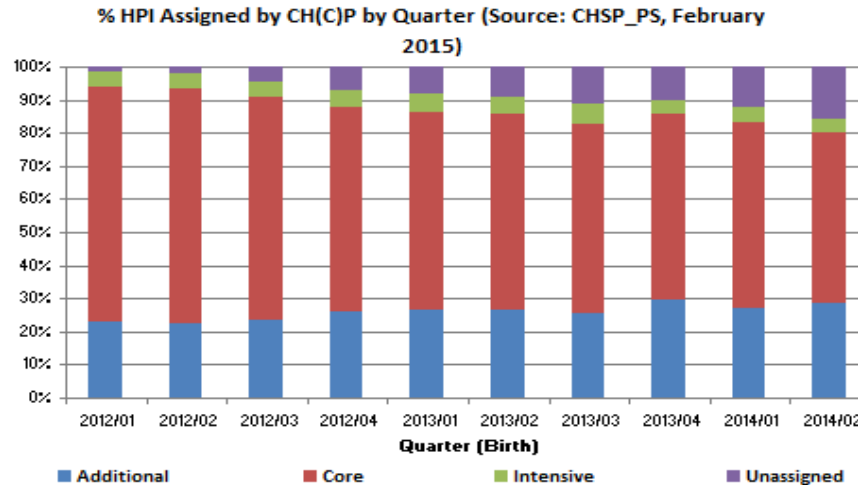
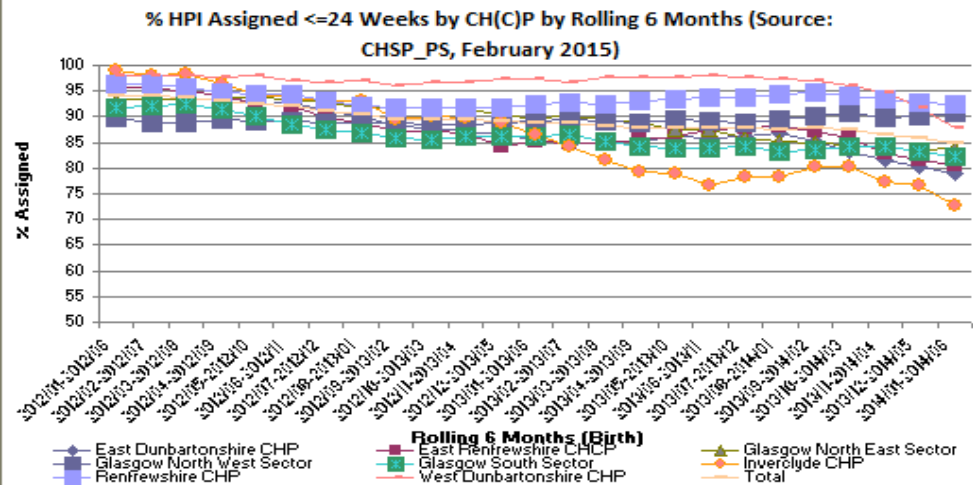
Average Caseload by WTE (March '15/Dec '14)



Locality	Core	Additional	Intensive	Unassigned	Total Caseload Size
NE	5543	2987	648	1009	10187
NW	7447	2679	498	775	11399
South	8196	3713	882	1656	14447
Glasgow City Total	21186	9379	2028	3440	36033
East Dun	3669	821	117	559	5166
West Dun	3192	934	159	297	4582
Renfrewshire	6061	2138	440	434	9073
East Ren	3492	706	72	519	4789
Inverclyde	1989	1121	183	541	3834
NHSGG&C Total	39589	15099	2999	5790	63477
NHSGG&C %	62.4%	23.8%	4.7%	9.1%	100.0%

Locality	Total Caseload Size	Average Caseload/WTE	Average Caseload/Headcount
NE	10187	203	179
NW	11399	301	228
South	14447	251	206
Glasgow City Total	36033	247	204
East Dun	5166	386	323
West Dun	4582	235	191
Renfrewshire	9073	265	245
East Ren	4789	435	342
Inverclyde	3834	240	202
NHSGG&C Total	63477	265	221

HPI Allocation





Organisa

Parenting Interventions / Scoring - Template Runner



GLASGOW, Holly (Miss)

Born 26-May-2011 (3y 1m)

Gender Female

CHI No. Unknown

Usual GP BROWN, Eddie (Dr)

Template Runner

Pages

Parenting Activity Recording and Reporting

Parenting Intervention data

Assessment Measures Scoring

Please use this template when the requirement for Parenting Intervention is identified and the offer of an intervention has been accepted. Return to the template when you commence the intervention to detail the date and the type of programme. Then again when the intervention is concluded or abandoned. You do not need to complete the entire template each time, only complete the section relevant to the stage you are at.

Need for Parenting Intervention Identified

You must complete this section when you have identified the need for parenting intervention and the parent has accepted that offer (ensuring the date field is accurate) then save the template. Each section should only be completed once per parenting intervention cycle.

Offer of a parenting intervention was accepted 11-Jul-2014 10-Jul-2014

Parenting Intervention Required following 27-30 mth assessment (11-07 submitted Code)

Is the parent concerned about child? 10-Jul-2014 No parental c...

Text

If there is a barrier to engagement, select a reason

Delivery Information

On commencement of the intervention please complete the following questions.

*You do not need to complete this section for every session delivered. You only need to complete this section on commencement.

Please select the programme to be delivered and the date commenced 10-Jul-2014 Triple P positi...

11-Jul-2014

Cancel

Full Access | M

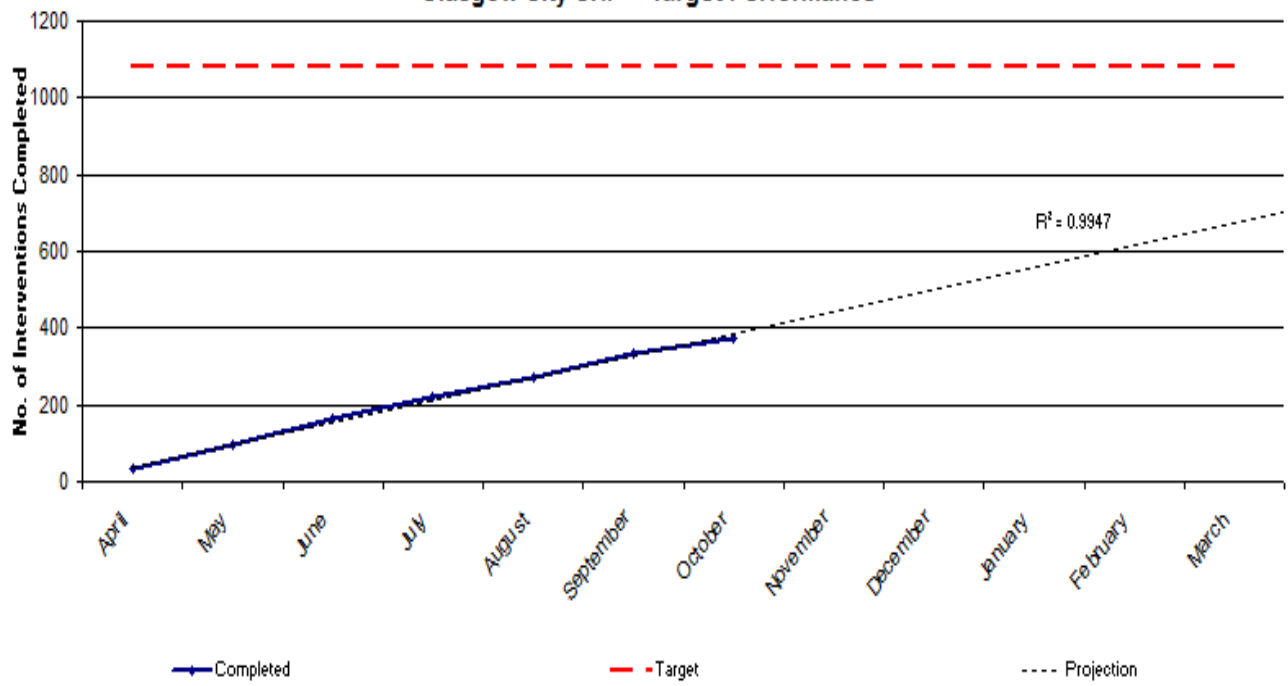


Desktop

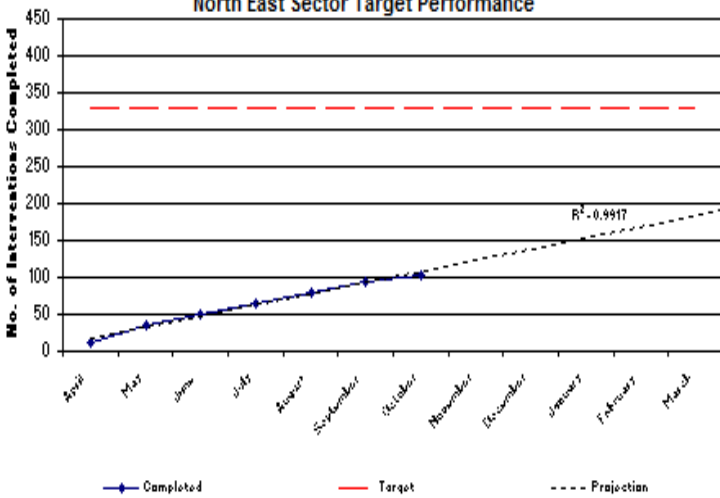
ENG

16:24
11/07/2014

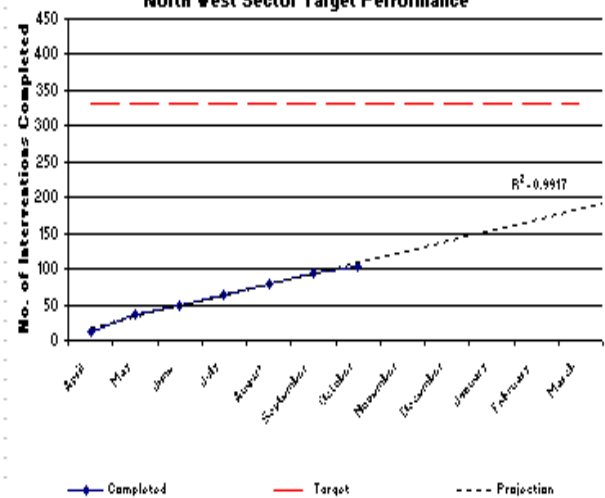
Glasgow City CHP - Target Performance



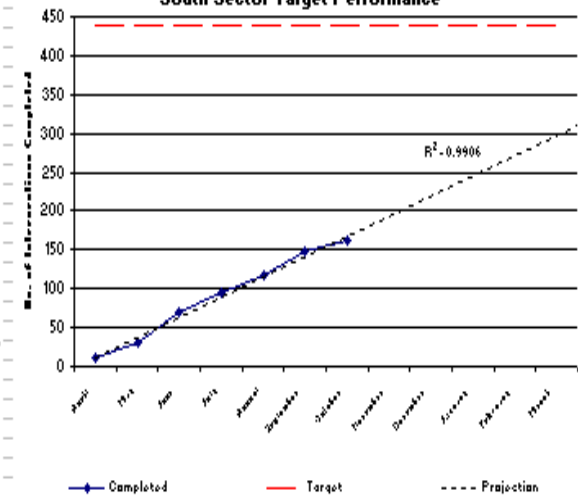
North East Sector Target Performance



North West Sector Target Performance



South Sector Target Performance



EMIS/Microstrategy Report

Some Examples for the 30 Month Assessment

Reporting Measures for 30 Month Assessment	Frequency				Geographic			
	Weekly	Monthly	Quarterly	Annual	Individual	Team	CHCP	NHSGGC
Number/% of SDQ completed (% of total assessments completed)		X	X	X	X	X	X	X
Number/% of completed SDQ where child scored within abnormal range (= to or > 17) in TDS		X	X	X	X	X	X	X
Number/% of completed SDQ where child scored within normal range (< 17) in TDS		X	X	X	X	X	X	X
Number/% of completed SDQ where child scored within abnormal range (= or > 5) in Emotional SS		X	X	X	X	X	X	X
Number/% of completed SDQ where child scored within normal range (< 5) Emotional ss		X	X	X	X	X	X	X
Number/% of completed SDQ where child scored within normal range (< 5) in Conduct SS		X	X	X	X	X	X	X
Number/% of completed SDQ where child scored within abnormal range (= or > 5) in Conduct SS		X	X	X	X	X	X	X
Number/% of completed SDQ where child scored within normal range (< 7) in Hyperactivity SS		X	X	X	X	X	X	X
Number/% of completed SDQ where child scored within abnormal range (= or > 7) in Hyperactivity SS		X	X	X	X	X	X	X
Number/% of completed SDQ where child scored within abnormal range (= or > 4) in Peer SS		X	X	X	X	X	X	X
Number/% of completed SDQ where child scored within normal range (< 4) in Peer SS		X	X	X	X	X	X	X
Number/% of completed SDQ where child scored within abnormal range (between 0 & 4) in Prosocial SS		X	X	X	X	X	X	X
Number/% of completed SDQ where child scored within normal range (>4) in Prosocial SS		X	X	X	X	X	X	X
Number/% of completed SDQ by total impact score within normal range		X	X	X	X	X	X	X
Number/% of completed SDQ by total impact score within abnormal range		X	X	X	X	X	X	X
Number/% of children completed SSLM-R (% of total assessments completed)		X	X	X	X	X	X	X
Number/% of children scoring less than 20 words (abnormal range)		X	X	X	X	X	X	X
Number/% of children scoring 21 words to 50 words (normal range)		X	X	X	X	X	X	X
Number/% of children with stammering or stuttering - codes on the assessmnet		X	X	X	X	X	X	X
Number/% of children with absent abnormal ability to understand - codes on the assessmnet		X	X	X	X	X	X	X

Health Visiting and Child Protection Population Reporting Potential

Edit Report
 Print
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Health Visiting Auto Report (3)

Parent Population: Health Visiting
Last Run: 26-May-2015 13:58 **Relative Date:** 26-May-2015 13:58

Patient Count	Males	Females
78	36	42

Patient Details			Referrals	Clinical Codes		
Age	Date of Birth	Gender	Target's Service	Date	Code Term	User Details' Full Name
0	27-Jul-2014	Male	C&F NW Maryhill Team	16-Mar-2015	On child protection register	REID, Jackie (HealthVisitor)
0	01-Aug-2014	Female	C&F NW Positive Start Team	12-Mar-2015	On child protection register	ALBROW, Elly (HealthVisitor)
0	07-Aug-2014	Female	C&F NW Plean St Team	11-Feb-2015	On child protection register	MILLIGAN, Lesley (HealthVisitor)
				25-Feb-2015	Child on protection register	STEELE, Carol (StaffNurse)
0	11-Aug-2014	Male	C&F NW Positive Start Team	18-Feb-2015	On child protection register	GILMOUR, Sheina (HealthVisitor)
0	21-Aug-2014	Male	C&F NW CCFH Team	21-May-2015	Child on protection register	FERGUSON, Janice (HealthVisitor)
				21-May-2015	On child protection register	FERGUSON, Janice (HealthVisitor)
0	27-Aug-2014	Male	C&F NW Woodside Team	02-Apr-2015	On child protection register	GALBRAITH, Elizabeth (HealthVisitor)
0	16-Sep-2014	Female	C&F NW CCFH Team	30-Apr-2015	On child protection register	KENDALL, Lynn (HealthVisitor)
0	26-Oct-2014	Male	C&F NW Woodside Team	10-Feb-2015	On child protection register	CROWN, Sheona-Mhairi (HealthVisitor)
				22-Apr-2015	On child protection register	CROWN, Sheona-Mhairi (HealthVisitor)
0	10-Nov-2014	Male	C&F NW Woodside Team	12-Feb-2015	On child protection register	CROWN, Sheona-Mhairi (HealthVisitor)
0	15-Nov-2014	Male	C&F NW Maryhill Team	15-May-2015	On child protection register	HOEY, Lesley (HealthVisitor)
0	17-Nov-2014	Female	C&F Glasgow City Central Parenting Team	19-Jan-2015	Child on protection register	HAINEY, Carol (HealthVisitor)
			C&F NW Possilpark Team			
0	20-Nov-2014	Male	C&F NW Positive Start Team	20-Feb-2015	On child protection register	GRIEVE, Ilona (HealthVisitor)
0	13-Dec-2014	Female	C&F NW Possilpark Team	30-Apr-2015	On child protection register	MCCALLUM, Jane (HealthVisitor)
0	28-Dec-2014	Male	C&F NW Drumchapel Team	29-Jan-2015	On child protection register	PARSONS, Mary (HealthVisitor)
0	29-Dec-2014	Male	C&F NW Positive Start Team	18-Feb-2015	On child protection register	ALBROW, Elly (HealthVisitor)
0	06-Jan-2015	Male	C&F NW Positive Start Team	20-Feb-2015	On child protection register	GRIEVE, Ilona (HealthVisitor)