



Children's Neglect Multi-Agency Strategy

2017 – 2019

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1. Introduction

The impact of neglect on children cannot be under-estimated. Imagine what it would be like for a child whose daily lived experiences include – no routine or structure to their day, not being able to rely on a parent to get them ready and dressed for school in the morning, not having any suitable or clean clothes to wear, going to school as a way of ensuring that you get a hot meal, no responsible adult looking out for you including when you are feeling sad or unwell, not knowing whether your mum is okay when you get home from school because your parents have been fighting. These are all indicators of neglect and there are many more examples that illustrate the point of what it's like for a child living in a home characterised by parental neglect. Apart from being potentially fatal, neglect causes great distress to children and leads to poor health, education and social outcomes in the short and long term. The consequences of neglect can include mental health problems, difficulties in forming attachment and relationships, lower educational achievements, an increased risk of substance misuse, higher risk of experiencing abuse as well as difficulties in assuming parental responsibilities later on in life.

The prevalence of childhood neglect in the UK has increased over the last 20-30 years. Neglect is a primary reason for 46 per cent of children subject to child protection plans¹ and was present in 60 per cent of serious injury or child deaths between 2009-11.²

In Knowsley neglect has become a common feature for too many of our children. In Knowsley over 50 per cent of children are subject to a child protection plan or living in care due to neglect. What we know is that in Knowsley children are more likely to experience neglect if they are living in households where there are factors such as parental substance misuse, mental health, or domestic abuse commonly referred to as the 'toxic trio'. An emerging issue in the local area is the number of children exposed to organised crime. This includes young children due to the involvement of parents and family members being involved crime or those older children usually aged 13 years plus who become directly involved in crime related activity.

Learning lessons from national and local research including recent Serious Case Reviews and case audits re-emphasises a key message: ***children are living in unacceptable neglectful families for too long, which can often go unrecognised by professionals working with families; and this includes here in Knowsley.*** The Knowsley Safeguarding Children's Board in its Business Plan (2016-18) identifies neglect as a key priority with an emphasis on;

- Increased focus on how effective services are in recognising and addressing neglect
- The partnership is effective in working together to prevent and respond to neglect in the community
- Children at risk of or are experiencing neglect are identified
- Children at risk of or experiencing neglect have improved outcomes³

This strategy has been developed on behalf of Knowsley Children's Safeguarding Board and partner agencies and as such applies to all agencies working in the borough. It is expected that relevant agency policies and procedures will take into account the strategic priorities set out in this document.

This document is supported by Knowsley's Threshold of Need Guidance 2016⁴, Practitioner Guidance: Working with Child Neglect and the Children's Early Help Strategy.

NB: A glossary of terms is attached as Appendix One.

¹ Gardner & Tyford, 2010; cited in NSPCC

² Brandon et al, 2013, cited in NSPCC

³ Knowsley Safeguarding Children's Board Business Plan 2016 -18

⁴ KSCB Threshold of Need Guidance 2016 – www.

2. Our vision

To collectively ensure the early recognition of neglect and improve agency responses to children affected by neglect through strong and effective multi-agency leadership.

3. The Local Context

We know that almost one third of children in the borough experience poverty. This is often low income families where the parents are dependent on a low or a single income wage and for others on welfare benefits. Families experience poor housing, rising debts and in some cases reliant on the use of food banks. Whilst we know this poverty isn't directly attributable to neglect there is causation between the two factors.

Measure	Knowsley	Stat neighbour	England
CIN rate per 10,000	460.8	474.5	337.7
Child protection rate per 10,000	64	67	43.1
Number of children who ceased to subject to CPP	70.8	75.2	53.7
Number with CPP for two years or more	3		1030
Proportion of children with a protection plan that has lasted for two years or more.	1.4%	1.5%	2.1%
Of the 1492 Children in Need 38.7% were categorised as experiencing abuse or neglect			
Of the 208 CP Children 49.5% were categorised as experiencing abuse or neglect			
Of the 290 Children looked after 49% were categorised as experiencing abuse or neglect			

4. Strategic aims and objectives

Knowsley Safeguarding Children's Board have identified a number of priorities and actions, which are reflected in the business plan for 2016/2018. These include ensuring children in Knowsley are safeguarded and protected from harm, including neglect.

Whilst the Safeguarding Action Plan 2016-18 highlights neglect as a priority. This bespoke strategy seeks to identify six core outcome objectives specifically in relation to neglect.

These are:

1. Reduction in levels of neglect
2. Improved attendance at school
3. Reduction in re-referrals to Children's Social Care concerning neglect
4. Reduction in looked after children concerning neglect
5. Increase in range of support available from early help
6. Increased awareness of professionals in respect of the impact of neglect

5. Definition of neglect

Knowsley has adopted the definition of neglect from statutory guidance as:

The persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to:

- *provide adequate food, clothing and shelter (including exclusion from home or abandonment)*
- *protect a child from physical and emotional harm or danger*
- *ensure adequate supervision (including the use of inadequate care-givers)*
- *Ensure access to appropriate medical care or treatment.*⁵

It may also include neglect of, or unresponsiveness to, a child's basic emotional needs. Determining what constitutes a 'persistent failure', or 'adequate clothing' or 'adequate supervision' remains a matter of professional judgement. Importantly practitioners need to have an understanding of neglect and how it's rooted in child development. Even when practitioners have concerns about neglect, research indicates that they may be unlikely to consider how they can help or intervene, apart from referring to Children's Social Care .

One of the objectives of this strategy is to improve school attendance in the borough. The links between poor attendance and attainment are compelling and the long-term life implications for residents significant. An Attendance Strategy has been developed and one of the task and finish groups has considered safeguarding and long-term absence and devised definitions relating to educational neglect.

⁵ Working Together to Safeguard Children, Department of Education 10 (2015)

The Department for Education endorsed a 2012 recommendation that, 'persistent failure to send children to school is a clear sign of neglect and that children's social care services should work with schools to address underlying difficulties' ⁶ and in 2013, the NSPCC cited, 'failure to ensure regular school attendance that prevents the child reaching their full potential academically' as one of their six forms of neglect. ⁷

In constructing the term for the Knowsley context, the intention was not to necessarily increase the traffic of social care referrals. Indeed, a number of young people that fail to attend school regularly are already on the caseload of both Social Care and the School Attendance Service. The purpose is to create a descriptor that highlights the critical educational and life implications relating to a child/young person that may not previously otherwise have been communicated. This is why it was agreed the term should not be used unless a 12 month period has elapsed in which certain thresholds are met. The term has already been included as a Level 4 Threshold of Need indicator within Knowsley.

These factors contribute to neglect not being well recognised and its impact not well understood.

6. Key Messages from Research and Serious Case Reviews

There is a volume of national research and publications evidencing the detrimental impact of neglect on children and the learning for practitioners. Neglect can severely alter the way a child's brain works. This can lead to an increased risk of depression in later life as well as dissociative disorders and memory impairments. Changes to the brain caused by neglect have also been linked to panic disorder, posttraumatic stress disorder (PTSD) and attention deficit and hyperactivity disorder (ADHD).⁸

Recent Serious Case Reviews in Knowsley has highlighted the need for a common framework and understanding of neglect across the partnership. This includes;

- Systems and processes for information sharing exist across agencies
- Practitioners need a better understanding of child development in identifying the impact of neglect on a child
- Support to families at an early stage leads to improved outcomes for a child rather than statutory child protection intervention when the child has experienced significant neglect. The Early Help assessment is the mechanism in order to achieve this
- There should be clear guidance and pathways for escalation

⁶ Improving Attendance at School, Charlie Taylor – Department for education Report 2012

⁷ 'Role of Schools, academies and colleges in addressing neglect – NSPCC 2013

⁸ (Child Welfare Information Gateway, 2009)

- Practitioners need ongoing support both practical and emotional to deal with 'resistant' families
- Practitioners' need to assess the impact of neglect taking into account issues of 'compromised parenting' and factors associated with parental substance misuse, mental health and domestic abuse. In working with families practitioners need to understand a child's history in order to avoid the 'start again syndrome'. As such it's important that practitioners complete case chronologies in order that a child's history can be pieced together, helping to identify significant life events, changes in family circumstances. Any patterns of incidents or concerns and services that have been involved in working with families.

7. Guidance principles

This strategy rests on key principles which provide a strategic framework:

- a) Enabling a shared understanding of neglect and the safety, well-being and development of children is the overriding priority;
- b) Ensuring the early recognition and identification of the signs and symptoms of neglect and the importance of effective collaboration amongst agencies. This will be co-ordinated through the Early Help assessment and the Graded Care Profile⁹
- c) Early help needs to be of a kind and duration that improves and sustains the safety of children and young people into the future;
- d) Children with additional needs such as special education needs and disabilities may be potentially more acutely vulnerable to incidents of neglect.
- e) Beneficiary engagement is critical therefore the views of children and young people and their families with regards to 'what works' will inform the development and implementation of effective interventions;
- f) Ensuring a 'whole-family' approach is owned by all stakeholders;
- g) All agencies need to consider historical information to inform the present position and identify families at risk of inter-generational neglect;
- h) Ensuring effective information sharing to inform assessments and evaluations of risk;
- i) Agencies need to challenge each other about improvement made by families and its sustainability;

⁹ Graded Care Profile – www.knowsleyscb.org.uk/wp-content/uploads/.../Knowsley-Graded-Care-Profile.

- J) Work with children and young people needs to be measured by its impact on outcomes;
- k) Suitable statutory action needs to be taken if insufficient progress is achieved and methods have been unsuccessful in addressing levels of risk present;
- l) Significant regard needs to be given to the overlap between neglect and other forms of child maltreatment such as domestic abuse and substance misuse etc.

8. Practitioners working with families

The Early Help Assessment should be used in order to draw agencies together to identify need and support for a family. Similarly in cases of statutory social work involvement the Single Assessment is the adopted tool. In cases of neglect assessments can be supported by the use of the Graded Care Profile (GCP). The GCP has been adopted by the local Safeguarding Children's Board as the standardised assessment tool in responding to neglect.

9. Key Indicators of Measurement

It is important that the measures of success are established and agreed, and an effective action plan is in place. A copy of the Action Plan 2016 – 2018 is attached as Appendix two.

The following outcome indicators will be able to provide insight into the effectiveness of the strategy and the implementation of the action plan:

Performance indicators

1. Number of child protection plans for neglect
2. Number of children reported missing from education
3. Number of children reported persistently absent from school
4. Number of looked after children as a result of neglect
5. Number of referrals to MASH for neglect
6. Completion of GCP concerning neglect
7. Number of Early Help and Single Assessments completed due to neglect
8. Multi-agency neglect training delivered across agencies
9. Hospital data on unintentional injuries to children. This includes young children admitted due to drug ingestion
10. Immunisation to infants in Knowsley (Local/national average)
11. Number of children attending hospital having multiple tooth extractions due to poor dental hygiene.

10. Governance

Governance and challenge will be provided by the Local Safeguarding Children Board, with sub-groups and a short task and finish working group to support the work of delivering the actions to support this strategy.

All Board Members are responsible to ensuring proactive support of the Action Plan, and delivery as required. The Board will hold all members to account.

Appendix 1

Glossary of Terms

Children – this refers to those aged between 0 -18 years, including unborn babies. Whilst older children often prefer to be referred to as young people the KSCB have purposely adopted the term children as it highlights their vulnerabilities and the associated assumption that because children are older they are less at risk.

Child protection plan – is the plan put together at a child protection case conference meeting detailing ways in which the child is to be kept safe. A child protection plan means that the child is at risk or suffering harm and a multi-agency plan needs to be in place to protect that child. A social worker has lead responsibility for any child subject to a child protection plan.

Children looked after – this is a child 0-17 years of age who is in the care of the local authority. The child will have a social worker who is responsible for coordinating their care.

Early help assessment – is a holistic assessment of a child's needs for services. It is a process for recognising signs that a child may have unmet needs that universal services cannot meet. It is also a process for identifying and involving other agencies who may be able to support the child and/or undertake a specialist assessment. Central to the development of the assessment is the principle that it is child or person centred, holistic and can be shared¹⁰ with professionals as appropriate

Graded Care Profile – it was developed as a practical tool to give an objective measure of the care of children across all areas of need by Drs. Polnay and

¹⁰ Effective Early Help Assessments: A Practitioner Handbook – January 2015.

Srivastava. The profile was developed to provide an indication of care on a graded scale. It is important from the point of view of objectivity because the ill effect of bad care in one area may be offset by good care in another area. It has been adapted to meet the needs of Knowsley, but the quality of the original version is acknowledged¹¹

MASH - the Knowsley Multi Agency Safeguarding Hub brings together agencies from services that have contact with children and adults at risk to make the best possible use of their combined knowledge to keep them safe from harm. The MASH provides a 'first point of contact' for Early Help, Children's Social Care (CSC) and Adults Social Care enabling members of the public and professionals to raise concerns about the safety and welfare of children or adults. This may include children or adults identified as potentially being in need of support or as being at risk of suffering abuse.

Single Assessment – this is a statutory assessment used by Children's Social Care and led by a child social worker to assess a child's needs. It is underpinned by a framework with the child's safeguarding needs and welfare at the centre and the ability of the parents to meet those needs, There are statutory timescales for completion of a Single Assessment in that they shouldn't exceed 45 working days and should include direct contact with the child, parents and information shared held by agencies.

Threshold of Need guidance (Knowsley) – this is a multi-agency document approved by the Safeguard Board and partner agencies setting out how children's needs will be understood and responded to by agencies in the context of universal support, targeted early help, children in need and child protection.

¹¹ Knowsley Graded Care Profile

