



# **Somerset Neglect Strategy**

**V9.2 November 2017**

## **Foreword**

Neglect has been identified as a priority for the Somerset Safeguarding Children Board because of the serious impact it has on the long-term chances for children. The purpose of this document is to establish strategic aims, objectives and priorities for Somerset in tackling neglect. It was developed by SSCB partners and applies to all agencies across all sectors working in Somerset.

Neglect is 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 and development. Neglect is a public health issue as well as a safeguarding issue. The impacts of neglect can be serious, enduring and can potentially continue across their life course; neglect commonly occurs in the context of poverty and other aspects of social disadvantage but can affect children in any social context.

In Somerset, as in all four countries of the UK, neglect is the most common reason for a child to be subject of a child protection plan, so understanding its repercussions and the potential for both prevention and intervention is vital. However, neglect can be difficult to identify and respond to. It rarely manifests in a crisis that demands immediate action, it commonly occurs alongside other forms of abuse and practitioners may become accustomed to the chronic nature of neglect. An effective response therefore requires practitioners to look beyond episodes of individual parenting and understand the neglect in context; to look also at the underlying factors that can lead to neglectful experiences – including poor parental mental health, domestic violence, poverty and social disadvantage – and to consider how support and interventions will help protect against further harm and vulnerability.

**Sally Halls**  
**Independent Chair, Somerset Safeguarding Children Board**

## Introduction

The **impact** on Children and Young People experiencing **neglect** in families is enormous. Neglect causes great distress to children and Young People, leading to poor health, reduced educational and social outcomes and is potentially fatal. Children and young people's lives are affected and their ability to attend and attain at school can be reduced. Their emotional health and wellbeing is often compromised and this can impact on their success in adulthood and their ability to parent in the future.

Research tells us that addressing the needs of a family in an holistic way is more likely to lead to better outcomes for children, young people and their parents or carers with additional needs by *co-ordinating* the support they receive from children and young people's, adults' and family services.

It can be difficult to identify neglect and research also shows that it often co-exists with other forms of abuse and adversity. It is also the most common reason for child protection plans in the UK – nationally 44.8% of child protection plans on 31<sup>st</sup> March 2016 had neglect identified as a category of abuse.

In Somerset over half (55.4%) of all child protection plans current on 31<sup>st</sup> March 2016 had neglect identified as a factor.

Neglect can also be an indicator of future harm if not addressed early and effectively. Its relationship to other forms of child abuse is significant and, for some, the impact of neglect upon their development can have serious consequences as they grow older, particularly in terms of their vulnerability to further abuse and exploitation.

Neglect is a key priority of the Somerset Safeguarding Children Board (SSCB) as identified in its [Business Plan 2016-2019](#).

## Aims and purpose of this strategy

The **overarching aim** of the Multi-Agency Neglect Strategy is to promote the welfare of children and young people and to improve their outcomes.

- Improve practitioners' understanding of neglect
- Identify and address issues early in order to improve outcomes

The strategy and accompanying practice guidance **will enable practitioners** across all agencies to:

- know what neglect is
- prevent neglect by being able to identify risk factors and
- respond early when indicators of neglect are identified

The strategy needs to be read in conjunction with Somerset Safeguarding Children Board's

- Effective Support for Children and Families in Somerset Guidance
- South West Child Protection Procedures (online)
- Resolving Professional Differences

The strategy's **accompanying action plan** identifies priority areas of work that take into account both local context and local findings.

## Vision for Somerset

*The Vision for Somerset is that committed and trained professionals from a range of agencies have a shared understanding about the complexity of neglect. Supported by robust management oversight and effective supervision, professionals recognise neglect early and effectively respond to help and protect children and young people.*

Neglect by its nature is complex and difficult to address. Because of this, it is absolutely vital that practitioners from all agencies get the basics right and get them right every time. The context of our local learning on cases of neglect reflects this importance and as such, the SSCB vision for this strategy is aligned to reinforcing the importance of these **fundamentals of practice** below, to:

**S**hare Information  
**A**ssess and Analyse Risk  
**F**ocus on the Child (and Think Family)  
**E**vidence decisions and use evidence to inform them and  
**R**ecord their work accurately

**If in doubt, practitioners will “go look” and make sure that they, or another practitioner visits the child or young person at home**

## Principles

The principles underlying this strategy are that:

- Children being neglected, or at risk of being neglected, need to be **seen, heard** and **helped**.
- **Think Family:** when working with a child, adult or family should take a holistic approach, think wider than your own service and share concerns to support the family. Identify key partners who can contribute to the response.
- **Early Identification:** early recognition and identification of the signs and symptoms of neglect and the importance of effective multi-agency assessment and collaboration to provide help early is the 'right' approach in Somerset. Practitioners are supported by the Effective Support for Children

and Families guidance in Somerset to provide the 'right service, in the right place, at the right time.

Children must be:

- **Seen**; in the **context of their lives** at home, friendship circles, health, education and public spaces (including social media).
- **Heard**; to effectively protect children and young people, professionals need to take time to **hear what children are saying** and put themselves in the child or young person's shoes and think about what their life might truly be like.
- **Helped**; by remaining **professionally curious** and by implementing effective and imaginative solutions that help children and young people. Practitioners should give parents and families **clear information** in relation to **expectations and improvements**.

## What is Neglect?

**Neglect is defined in Working Together to Safeguard Children 2015 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); or*
- *ensure access to appropriate medical care or treatment.*

*It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.”*

**Risks** (see South West Child Protection Procedures

[http://www.proceduresonline.com/swcpp/somerset/p\\_neglect.html?zoom\\_highlight=neglect#Risks](http://www.proceduresonline.com/swcpp/somerset/p_neglect.html?zoom_highlight=neglect#Risks) )

A number of factors increase the likelihood of neglect. However, they are not predictors of neglect in themselves and therefore should be used and interpreted with care. Studies also demonstrate that in the majority of families where risk factors are found, families do not go on to neglect or abuse children (e.g. Sidebottom 2003).

For example, although poverty is a risk factor, it is vitally important to remember that neglect can and does occur in **affluent households** where other risk factors are more relevant.

Families may have a combination of risk factors which could include the following:

<b>Child risk factors</b>	<b>Parental risk factors</b>	<b>Wider Risk Factors</b>
Disability Behavioural problems Chronic ill health Poor school attendance	Poor Mental Health (especially maternal mental health difficulties) Substance Misuse Domestic Violence and Abuse Learning Difficulties Lack of experience of positive parenting in childhood Young Parents Poor engagement with antenatal services	Poverty Unemployment Poor social support Poor housing Families experiencing multiple problems

It is common for evidence of neglect to present through signs and symptoms which may be noticed by different agencies in relation to different children in the family at different points of time. Many indicators of neglect are not difficult to recognise. Professionals may be concerned when children come to school dirty or hungry, or when they visit homes that are unhygienic or unsafe. Yet, numerous Serious Case Reviews show professionals individually have concerns about a neglected child but too frequently these concerns are not shared and /or do not trigger effective action.

### **The impact of Neglect**

Neglect has the potential to compromise a child’s development significantly. Because neglect frequently coexists with other forms of maltreatment, it can be difficult to disentangle its unique consequences. However, there is significant evidence to suggest that it has an adverse impact on all the seven dimensions of development identified in the Assessment Framework: health, education, identity, emotional and behavioural development, family and social relationships, social presentation and self-care skills (Tanner and Turner, 2003; Norman et al., 2012; Hildyard and Wolfe, 2002; Manly et al., 2001).

Neglect is particularly damaging in the first two to three years of life - and it can continue to compromise development throughout childhood and adolescence.

*The impact of neglect of children is often accumulative, advancing gradually and imperceptibly and therefore there is a risk that agencies do not intervene early enough to prevent harm. (City and Hackney Safeguarding Children Board (CHSCB))*

## Prevalence of neglect

Nationally

Research suggests that 1 in 10 children in England have experienced neglect (Radford et al. 2011). Nationally, there has been an increase in the awareness and recording of child abuse and neglect and England and Wales have seen an increase in the number of recorded cruelty and neglect offences in the last year.

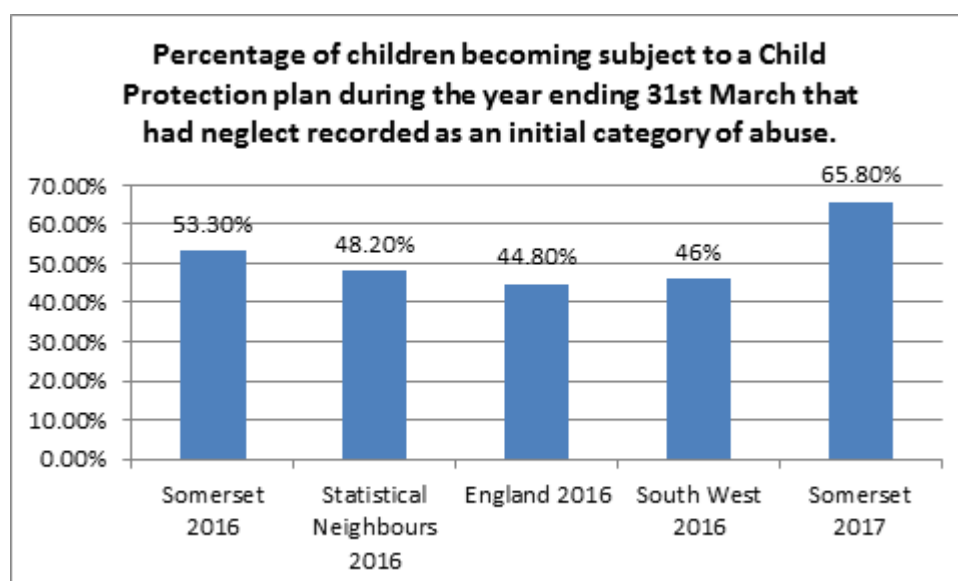
Data gathered nationally only identifies children that have experienced neglect who are already in contact with statutory services, i.e. subject to a child protection plan. The prevalence of neglect therefore is thought to be **under represented** as it may not be picked up in children not subject to statutory services or where there are numerous concerns perhaps including other forms of abuse.

Also, the ability to benchmark the early identification of neglect with neighbouring and national authorities is more challenging, as not all local authorities can provide data on the number of children in receipt of an Early Help Assessment where the primary concern is neglect.

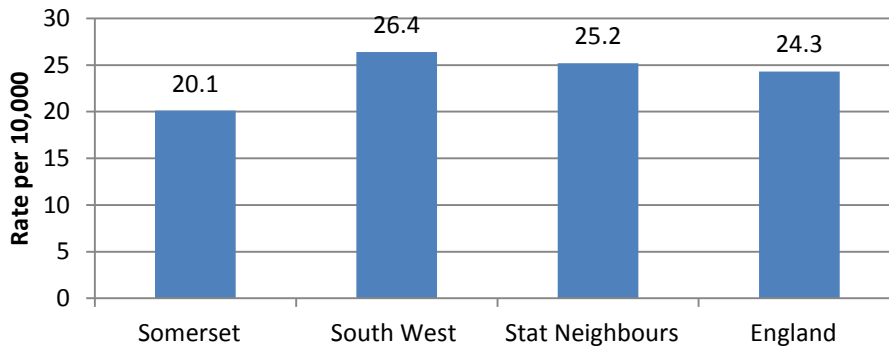
### What do we know about the prevalence of neglect in Somerset?

Neglect was the initial category of abuse for 65.8% of children who became subject to a Child Protection plan in the year ending March 2017. This is an increase from 53.3% from the previous year.

Data and Information about neglect in Somerset is derived from the number of children who became subject to a child protection plan that had neglect recorded as an initial category. The data has limitations as Children in Need data and the reasons for children starting to be looked after do not currently identify neglect as a separate category to other forms of abuse. However, the local data for year ending March 2016 can be compared to rates of neglect nationally, in the South West and our statistical neighbours and is presented in the graph below.



## Children becoming subject to CP Plans for neglect - rate per 10,000 children. Year ending 31/03/2016



In addition to children who are subject to child protection plans, there are children who are not in receipt of statutory child protection services who are being offered early help due to concerns relating to neglect. There were 1959 on-going Early Help Assessments as at 31<sup>st</sup> March 2017 completed for children in Somerset and only 117 (6.0%) where neglect was identified as the primary concern. Identification of hidden harm factors (domestic abuse, adult mental health and substance abuse) was more frequent - 793 (40.5%) of the ongoing EHA identified one or more of the hidden harm factors while all three factors were identified in 41 (2.1%) of the assessments.

Hidden harm relates to the impact of parental behaviour related to substance misuse, domestic abuse and mental health on dependent children. These behaviours may occur in isolation or combination and evidence from serious case reviews shows they put children at greater risk of abuse and neglect. Therefore it is important that hidden harm factors are identified at the earliest opportunity.

### Serious Case Review (SCR) findings and themes

Neglect is a factor identified in **60% of serious case reviews** and Domestic abuse, mental ill health and/or substance misuse were common in households where children were neglected.

**Neglect is the most common reason for initiating child protection procedures.**  
(Source: NSPCC (2015) How safe are our children? 2015 Indicators 8 and 14)

Key findings from recent research are:

- Neglect is more prevalent in serious case reviews than had previously been understood (neglect identified in 60 per cent of the 139 reviews from 2009–2011).
- Neglect **can be life threatening** and needs to be treated with as much urgency as other categories of maltreatment.



- Neglect with the most serious outcomes is not confined to the youngest children, and occurs across all ages.
- The possibility that in a very small **minority of cases neglect will be fatal**, or cause grave harm, should be part of a practitioner's mind set. This is not to be alarmist, nor to suggest predicting or presuming that where neglect is found the child is at risk of death. Rather, practitioners, managers, policy makers and **decision makers should be discouraged from minimizing or downgrading** the harm that can come from neglect and **discouraged from allowing neglect cases to drift**.
- The key aim for the practitioner working with neglect is to **ensure a healthy living environment and healthy relationships for children**. Prevention and early access to help and support for children and their families are crucial, but so too is later stage help for older children who live with the consequences of longstanding neglect.

(Source: Brandon, M. et al. (2013) Neglect and serious case reviews: a report from the university of East Anglia commissioned by NSPCC)

### Local Multi-agency Learning Review (SCR) findings

**Background** - Child K and Child Q are young babies from different families, but the issues are similar so these cases were reviewed together by the SSCB. These two babies were a few weeks old when admitted to hospital following significant starvation.

**Safeguarding Concerns** - Child K had older siblings; her parents were living separately and there was a history of domestic abuse. Mother resisted the admission of Child K to hospital. Child Q was premature. Child Q had young parents who had experienced a violent relationship in the past. The baby was admitted to hospital at 15 days and then he was discharged home with a feeding plan.

**The incident** - Both babies were admitted to hospital where tests indicated significant starvation had occurred.

Following review of the information submitted by each agency, the SSCB held a learning event in May 2016. The majority of the 20 participants had direct experience of working with one or other family.

## Review Findings

### There were common themes of neglect in both cases

**Neglect**—a reluctance to see the lack of weight gain as a manifestation of neglect

**Compliance** – both families were resistant to intervention by agencies

**Hostility**—workers attempted to be flexible and accommodating in the face of verbal aggression, the balance between support and challenge was hard to maintain

**Parents' own issues**—both families had complex dynamics with different family members in receipt of services from different agencies

**Professional communication**—the Red Book was not always made available or updated properly, causing a lack of continuity in the recording of concerns

**Pre-birth Planning Protocol**—Pre Birth guidance was limited and there was no local protocol available at the time

**Use of escalation policy**— there were pre-existing concerns and evidence of lack of cooperation and lack of progress, but the SSCB resolving professional differences policy was not used.

*(Source: SSCB Learning Bulletin “Things You Should Know”, April 2017, Issue 4)*

### Strategic priorities for Somerset Safeguarding children Board are to:

- Secure **collective commitment** to addressing neglect across all agencies including strong multi-agency **leadership, culture and systems** to address neglect
- Strengthen and continue to **embed Early Help** practice whereby agencies work collaboratively together to identify neglect and respond early
- Improve the **knowledge, skills and competence** of practitioners to identify and respond to neglect; including a **common understanding of neglect and thresholds** for agency intervention

Given the interface of neglect with other forms of harm and abuse, the SSCB places this strategy in the context of **other strategic plans** that influence the safety and wellbeing of children and young people in Somerset.

This includes explicit acknowledgement of the **impact of neglect** in creating the vulnerabilities that make children and young people more susceptible to **exploitation in all its forms**, including criminal and sexual.

## Early Help

It is paramount that the multi-agency response to neglect provides **early help to children and young people and families**.

“Providing early help is more effective in promoting the welfare of children than reacting later. Early help means providing support as soon as a problem emerges, at any point in a child’s life, from the foundation years through to the teenage years. Early help can also prevent further problems arising, for example, if it is provided as part of a support plan where a child has returned home to their family from care” (source: Working Together, 2015)

In its 2014 report into a number of thematic inspections, **In the Child’s Time: Professional Responses to Neglect, Ofsted** identified that “the pervasive and long-term cumulative impact of neglect on the well-being of children of all ages is well documented”. Findings from both inspections and research highlight the following areas as being **key components** to a successful, multi-agency response to neglect.

- **Early recognition and intervention**
- **Robust management oversight and supervision**
- **Specialist training**
- **Acknowledgement of complexity**
- **Effective and timely professional responses both for help and protection**
- **Use of tools**

The following themes, informed by the above factors, local learning and strategic priorities, provide the focus for further developing the local arrangements and responses to neglect in Somerset. The Somerset Neglect action plan has been developed against these themes.

## Theme 1: Governance

**To secure collective commitment to addressing neglect across all partner agencies and to demonstrate effective leadership in driving forward the appropriate systems, culture and process changes required.**

*The focus of this theme is a recognition of the need for all organisations to show leadership and commitment to identifying and responding to neglect, to promote a culture that encourages professional curiosity, challenge and appropriate escalation of concerns. This commitment is required from all levels and all agencies including those who are in the housing and environmental services.*

Governance will be provided by the Somerset Children's Trust and challenge by the SSCB. The Children's Trust will monitor progress against the strategic objectives on a quarterly basis, outcome data will be monitored by the SSCB quality and performance sub group. The SSCB will challenge the Children's Trust Board on the effective delivery of the strategy via regular outcome indicator progress reports. The SSCB will ensure arrangements monitor the effectiveness of how leaders:

- ensure their **practitioners have an overview** of the prevalence and type of neglect affecting children and young people in their local area.
- ensure their practitioners have a **shared understanding** of neglect and know **what to do if they are worried** about a child or a parent and how to **escalate concerns**.
- ensure that **early identification** and the effective response to neglect will remain a **priority** across all organisations, both statutory and non-statutory.
- support **effective joint working between adult and children services** and across relevant strategic Boards; supporting a clear local partnership response to neglect that adopts a **'Think Family' approach**.
- drive the importance of the professional networks talking with each other and **sharing information** appropriately in order to tackle neglect effectively.
- ensure their staff are **sufficiently trained** (both single and multi-agency training) to recognise and tackle neglect and are particularly alert to the risks arising for children with **special needs and disabilities**.
- ensure that **relevant developments in service provision are promoted** and clear for practitioners on a multi-agency basis.

### **Robust management oversight and supervision**

- All practitioners receive **effective supervision** to help them test, challenge and reflect upon their analysis of risk to children and young people; particularly in the context of neglect and the cumulative indicators of harm.
- Practitioners **challenge each other and escalate** as appropriate when there are professional differences.

### **Theme 2: Prevention**

**To improve the recognition, assessment and response to children, young people and families living in neglect, before statutory intervention is required, including the appropriate use of assessment tools and to empower families to respond to children's needs.**

*Through a focus on this theme, it is intended that there is early recognition of neglect and effective and timely responses both for help and protection.*

Professionals who come into contact with children and young people and families will have relevant **knowledge** and a **common understanding of neglect** between and within agencies, as this is crucial to allow effective identification and a **common language**.

### Early Recognition of Neglect

- Neglect is identified and **named as a concern** by professionals at the earliest opportunity. Professionals know **who to contact**, and **know what will be done** in response. This is supported through robust awareness raising and regular **training provided by the SSCB** to partner agencies.
- All professionals **“Think child, think parent, Think Family** and are alert to the risk of children being neglected through exposure to **domestic abuse, parental substance misuse, parental mental health issues** and **learning difficulties**.
- Staff do not normalise neglect because of poverty, there is greater awareness of **“Neglect by Affluence”**
- **Early Help** services **effectively assess** and provide timely, robust multi-agency services to prevent problems getting worse with fewer children and young people being brought up in households suffering from neglect.

### Effective and timely professional responses both for help and protection

- All professionals are intently **curious** about family circumstances and undertake or facilitate **home visits** to check on children and young people at home. **“If in doubt, go look”**
- Assessment processes take account of the needs of the **whole family**, promoting a holistic approach with a genuine focus on prevention and promoting the health, safety and wellbeing of all family members

### Theme 3: Intervention

To demonstrate robust multi-agency working together, sharing information and an understanding of agency’s threshold of intervention whereby agencies are able to collaborate early and intervene in ways which engage the parents and take into account historical information to inform present position and the multiagency response.

*Through a focus on this theme, it is intended that practitioners have the correct knowledge and skills for intervention with families who may present particular challenge and resistance.*

- There will be an understanding of each agency's **thresholds for intervention** – which will allow effective and meaningful challenge (and escalation as appropriate) concerning cases of neglect.
- **Families** who have identified needs and require additional support are **targeted/supported**
- There is effective collaboration and **information sharing**.
- **Hard to engage parents** do not prevent effective intervention with the child or young person.
- All services consider/research **historical information** to inform the present position.
- Professionals are able to identify and address vulnerabilities associated with neglect and **build up families' ability to sustain change**.
- There are clear processes and mechanisms to enable practitioners to **assess and identify risk**.
- Where **neglect themed assessment tools** are used – these are aligned to the effective support guidance
- Members of the **community** are better equipped to **recognise neglect** in all its forms and how to **report it**.
- They are also supported in understanding their responsibility to respond to neglect and their contribution to preventing neglect is acknowledged

#### **Theme 4: Evaluation**

**To monitor progress in reducing the risk of neglect in the population of Somerset.**

Through a focus on this theme, it is intended that the SSCB and its partners will demonstrate the effectiveness of the strategy and its implementation through a robust, shared and jointly owned evaluation framework which measures success and impact of the three strategic priorities.

The SSCB will monitor performance through a clear set of outcome measures which will be determined by the Quality and Performance subgroup.