

SSCP Learning Bulletin “Things You Should Know” November 2020, edition 27

In this issue we are focusing on **good practice**.

On pages 2-3 there is a case study of the Currie family, which shows some positive outcomes from **effective pre-birth planning**.

The SSCP **Independent Scrutineer**, Dr Mark Peel, shares his reflections on changes in Somerset on page 4.

Service developments in **Route1** and the **Phoenix Project** are featured on pages 5-6, and details of **pre-birth planning workshops** are on page 7.

Read on for information about the forthcoming **Safeguarding Week**—coming soon.



Somerset Safeguarding Children Partnership

SAFEGUARDING WEEK

7th - 11th DECEMBER 2020

Somerset Safeguarding Children Partnership is pleased to be running a series of FREE online events to hear from SSCP stakeholders and provide updates on partnership activity for children and young people. Sessions include:

- COVID-19 and Young People’s Mental Health**
- Learning & Good Practice: Hearing the Voice of Young People**
- Learning from Serious Case Reviews**
- New Models in Family Safeguarding Solutions**
- Policing During a Pandemic**

These events are suitable for anyone who works with children and young people in a paid or voluntary capacity.

For more details and to book, visit:

www.sscb.safeguardingsomerset.org.uk/forum



WORKING EFFECTIVELY WITH FAMILIES

CURRIE FAMILY



1. The Background

Michelle lives in Somerset, where she is in a new relationship with Kevin. Michelle presented to midwifery services at **20 weeks pregnant** with her second baby. Michelle's first child is in foster care. This child will be Kevin's first baby.

2. Safeguarding concerns

- Michelle reported that she **concealed the pregnancy** due to her drug use and her concern about Children's Social Care involvement.
- Michelle and Kevin were both **homeless** and **drug users**, and both were seen to be visibly under the influence of substances at scans and midwifery appointments.
- Michelle and Kevin both have a **long criminal history** with many arrests, Kevin has been to prison for drug dealing.
- Both Michelle and Kevin have **mental health conditions** which affect their ability to care for themselves.

3. Use of the Pre-birth protocol

Using the **pre-birth planning protocol** helped to identify the risk factors that met the threshold for referral (see pink box on Page 3). A Children's Social Care referral was submitted following consent from parents.

4. Complex Care Midwife involvement

Michelle became a patient in the caseload of a midwife in the Complex Care Team. At the first midwifery appointment Michelle was anxious and defensive. The relationship developed and Michelle agreed to have **regular antenatal appointments**, and was seen by the same midwife, weekly if needed. The midwife:

- Supported Michelle and Kevin, including attending all scans and consultant appointments as Michelle was very nervous.
- Attended the first appointment with the social worker to support the parents
- Explained medical terminology simply
- Monitored Michelle's mental health and drug use
- Explained to the parents what changes they needed to make to ensure their unborn baby would be healthy and also able to stay with them
- Liaised closely with other professionals, eg the Homeless Support Workers
- Supported with paperwork—eg filling in paperwork for Maternity Grant, and wrote to the council about housing
- Supported Michelle and Kevin through the Child Protection Conference so they understood why professionals were worried.

5. What has changed for the family

- Michelle and Kevin made positive progress in the pregnancy.
 - The family moved into their own property
 - Michelle and Kevin stopped using illicit substances and engaged with professionals (eg mental health services)
 - The plan was made for the parents to go home with their baby with a Community Based Parenting Assessment to be completed through Children's Social Care.
 - Michelle has sorted out her finances, benefits, and bank account
- In the post-natal period the midwife was shielding due to COVID-19 restrictions. However, the midwife had daily telephone or video calls with the parents and attended meetings virtually. At day 28 postnatally the family were handed over to the Health Visitor.

6. What worked well

- The parents had continuity of care through the Complex Care Team, helping them to feel supported and build a professional and supportive relationship.
- All professionals worked well together. By following the pre-birth protocol professionals were able to refer to Children's Social Care as soon as they presented to midwifery, then social workers completed assessments and worked with Michelle and Kevin to improve their parenting ability.
- The parents were open and willing to make changes. They gained confidence in their parenting ability.
- Professionals gave consistent information and were straightforward with their concerns, helping the parents to make the changes necessary for their baby to stay in their care.

The Pre-birth Planning Protocol

Refer to the South West Child Protection Procedures (SWCPP) chapter **Pre-birth (safeguarding unborn babies)** for full information on how to work together with families to safeguard unborn babies in families who may have identified vulnerability and risk indicators. The chapter provides an agreed process between health agencies, Children's Social Care and other agencies working with the mother and her family.

To compliment the SWCPP chapter Somerset Safeguarding Children Partnership have produced a **toolkit** with local supplementary information. See www.sscb.safeguardingsomerset.org.uk/prebirth for more information



*Case contributed by SM, Midwife
To ensure anonymity, names and some
details of the case have been changed.*

See page 7 for details of forthcoming
Pre-birth planning workshops
December 2020

A message from the SSCP Independent Scrutineer

Dr Mark Peel

It has been just over a year since the safeguarding arrangements went live in Somerset, and [Somerset Safeguarding Children Partnership](#) came into being. I arrived as Independent Scrutineer in January, so this seems a good time to reflect what has been achieved as well as looking forward to future developments.

The new arrangements bring Police, Health and Children's Services together with shared statutory safeguarding responsibilities.

Serious Case Reviews which took such a long time to complete that their findings were often seen as being 'too little too late', have been replaced with **Rapid Reviews**, that use a much shorter timescale and focus on learning lessons when things go wrong.

Welcome and practical changes to how we safeguard the most vulnerable children and young people in our local community have been embraced by the Somerset Safeguarding Children Partnership (SSCP) and the evidence, from my independent perspective, is that this has resulted in **significant improvement** across the piece.

At the centre of the Partnership a well-led **SSCP Business Unit** co-ordinates a number of multi-agency groups working to the Executive make sure that safeguarding issues identified in review and priorities set by the Executive, are taken forward in a 'joined up' way for all professionals with safeguarding responsibilities. For example, even during the very challenging circumstances brought about by the pandemic a comprehensive package of [training opportunities](#) has continued to be offered virtually, to great effect.

The voice and experience of young people continue to be at the heart of safeguarding in Somerset, giving me the perfect opportunity to say a **personal 'thank you'** to all the young people involved.

The **recent changes** to safeguarding arrangements, both in law and in relation to day to day practice, are **very considerable**, and are perhaps the biggest 'shake up' to the sector in the last ten years. Some of the changes required have been immediate and practical, as I have tried to reflect here. But others require something of a 'cultural shift', and that will take time to bed in, and for us to be able to evaluate.

Certainly there are many exciting developments to come, including the new [on line forum](#) full details of which are included in this bulletin.

As a result of all of the above, at the end of my first nine months in role as Independent Scrutineer for Somerset, I am greatly encouraged by what I have seen.

Dr Mark Peel,
Independent Scrutineer,
Somerset SSCP



ROUTE1 ADVOCACY

Route1 Advocacy have reinstated face-to-face meetings for children where this can take place in their school environment (and adhere to individual school Covid-19 safety measures). Virtual and telephone advocacy continue to be available where the school environment is not appropriate for the child, or the young person would prefer to talk with their advocate this way. Route1 volunteers are not yet able to offer face-to-face advocacy meetings in children's homes although this will be reviewed on a regular basis and reintroduced as soon as the Covid-19 risk is sufficiently reduced.

Some other things you might not know

- Route1 has been able to extend the offer of support to **care leavers** up to 21 and for those with additional vulnerabilities up to 25
- Route1 are still matching Independent Visitors (IV) with children looked after, and feedback from children is that under Covid-19 this relationship has been even more important
- Route1 can provide an advocate for care leaver parents attending a Child Protection Conference about their children
- Route1 can support young people to make a complaint if they are unhappy about the services they have received from Children's Services
- Route1 Coordinators are happy to come to Team Meetings to talk about improved access to advocacy and the importance of the IV relationship
- Route1 are supporting the Fostering Feasibility Study to assist with stability for children in foster care
- Route1 will soon be developing and expanding their services to children with Special Educational Needs and Disabilities.

You can find more information and a great video about advocacy and the voice of the child by following the links below

<https://volunteering.somerset.gov.uk/opportunities/route-1-advocacy>

www.route1advocacy.co.uk



Parent & Carer Support



At the Somerset Phoenix Project we understand the overwhelming impact child sexual abuse can have on the whole family therefore our service offers a holistic approach for parents/carers wishing to access support for themselves.

Criteria

1. We take referrals from the non-abusive parent/carers or professionals, wishing to get support for the adult. We are able to work with the adult even if we are not working with their child/young person.
2. Parent/carers must be a resident in the Somerset County Council area.
3. They must have a child or young person between the ages of 1-18 years.
4. Sexual abuse must have stopped
5. If there is court case date set then we can only offer counselling after the date/trial.
6. If a request for support for their child or young person is made whilst they access our service this will follow its own service procedure.
7. Counselling only: If a parent/carer has already had counselling via the Somerset Phoenix Project we will only be able to offer more counselling after 1 year has passed.

What we can offer

Book in - One off slot

This is a one off slot for those parents/carers wishing to access information on the impact of trauma and the effects on their wellbeing. After coming to this slot, sometimes the parent/carer may then be referred (of course this is their choice) to our other services or signposted to other organisations.

Book in - Drop in service

Three times a month, term time only, there will be a drop in service held at different locations or over the phone. This is an opportunity for those parent/carers that have referred, or been referred, to this part of the service, to book a time for an individual therapeutic supportive slot with our counsellor. Parent/carers will be listened to and supported and may wish to talk through such subjects as, looking after themselves, parenting experiences and help with signposting and further information. The drop in is an 'as and when' needed service and is not sessional counselling.

Counselling

We offer 24 sessions term time only of individual counselling for those parent/carers that are ready for a therapeutic journey, the sessions are safe, parent-led and may enable some of the emotional and parenting complexities that a parent/carer maybe experiencing to be thought about.

What's Next

More detailed information is available on our website www.somersetphoenixproject.org.uk or download a request for support form. The form can be filled out by the adult requesting support or a professional can help support them to complete it.

Contact the Somerset Phoenix Team

Phone or text number: 07590 627693

email: somersetphoenixproject@barnardos.org.uk

Web: www.somersetphoenixproject.org.uk



Barnardo's Registered Charity Nos:
216250 and SC037605





MULTI-AGENCY PRE BIRTH PLANNING



Improving Multi-Agency PRE BIRTH PLANNING

Join staff from Children's Services, Midwifery, Public Health Nursing and Police to think about how different pre-birth tools can be used to work together with families to safeguard and support unborn babies.

This online workshop will be a practical session giving guidance about how to access and use these tools in practice. The same session will be delivered on 6 different dates to help staff find a time to attend.

Online Workshop Dates:

1st December (10-11.30am)

10th December (9-10.30am)

2nd December (2-3.30pm)

16th December (9-10.20am)

8th December (3-4.30pm)

17th December (9-10.30am)

[Click here to book a place](#)

Contact the SSCP

Contact us by email: SSCP@somerset.gov.uk.

The SSCP has a circulation list to send email alerts when new newsletters or learning bulletins are published. If you do not currently receive these emails and would like to sign up to the list, visit our website

sscb.safeguardingsomerset.org.uk

