



Child A Safeguarding Practice Review 7-minute briefing July 2022

1. Background

In September 2020 the Local Authority notified Ofsted of a Serious Incident as a result of long-standing chronic neglect suffered by Child A whilst in the care of her mother. She was removed from her home under Police Protection and admitted to West Middlesex University Hospital due to the impact of severe physical and emotional neglect. Prior to her removal from her home in August 2020, Child A had previously been subject to protection plans and the risk of significant harm considered within the legal threshold for removal from her mother care. Child A was discharged from hospital following an assessment into a foster placement.

2. Key Areas of Enquiry

- Focus on the child in all assessments and understanding how she became less visible to professionals.
- Opportunities for the child to make disclosures.
- Assessment and consideration of undiagnosed parental mental health.
- Effectiveness of decision making and assessment of risk, outcomes and impact within the Child Protection Case Conferences and multi-agency safeguarding meetings.
- Professional understanding and exploration of Elective Home Education and the impact on a child's life and its consideration in assessments of risk.
- Professionals understanding of the indicators of neglect.

3. Lessons learned

Elective Home Education (EHE) - professionals need to consider whether there is a safeguarding risk posed to the child, whether parents have the intellectual capability and resources to educate their child to a sufficient standard and whether the child agrees to being removed from school.

Collating information - The importance of this to ascertain whether there are concerns about a child being removed from mainstream education is vital if children are to be safeguarded and their wellbeing promoted.

Child Protection process - The necessity for agencies to challenge each other when there is indecisiveness and/or inappropriate decision-making during CP Conferences, is vital for positive outcomes for children at risk.

4. Lessons learned

Neglect assessment tools - Given that Neglect is the most frequent category of abuse for children subject to CP Plans, it is vital that partner agencies use the resources available to assess neglect to ensure the response is swift and robust

Collating information - If information, known to those involved in the CP process about Mother's mental health, had been collated, then the agencies involved would have evidence-based knowledge of the seriousness of Mother's mental health and its impact on Child A's wellbeing

Considering children holistically - It is important that professionals take account of what is not said, the conditions in which they live and their physical and emotional presentation.

School absence - when a child has a history of frequent absence, professionals need to recognise this as a serious safeguarding issue.

5. Recommendations for HSCP

- Any concerns that the visiting member of the EHE Team has about the suitability of a parent providing home education must be raised with their line manager and the child's parent.
- Professionals should be confident to challenge each other and the Chair when there are disagreements or concerns about decisions made during conferences or adherence to CP Plan.
- Assurance should be sought that agencies are utilising the tools/resources available to assess neglect, and agencies held to account if they are not doing so.
- When a child is taken into police protection consideration should be given a) as to whether advice is needed to decide if a CP medical and/or immediate medical attention is required and b) by Partner Agencies to appointing a SPOC within CSC for concerns to be dealt with when a child is waiting for a suitable placement.

6. Good Practice

- The action on the part of the Secondary School to take seriously the concerns about Child A's non-school attendance, the quality of her home life and Mother's intention to electively home educate.
- The concerns raised by Police about Mother's mental health and the welfare of Child A
- The questioning of the A&E doctors about Child A being discharged.
- The referrals to the Mental Health Team, CAMHS and to Children's Social Care by the GPs involved with the family.

7. Further Information

[HSCP Child Safeguarding Practice Review
Child A Executive Summary](#)