

# Multi Agency Case Audit 6 Step Briefing Neglect 2

# Theme / Cases

- Themes are based on priorities identified by the NSCB and Quality Assurance Sub Group.
- Quality Assurance Sub Group members nominate cases.

## The Process

The process for completing the Multi-Agency Case Audit (MACA) comprised:

- The selected cases were circulated to MACA members and each member was asked to produce evidence of their engagement with the young person. A summative report was produced, in addition each agency was asked to consider their historic and current engagement and where relevant, answer the following questions:
  - 1. Has the neglect toolkit been used?
  - 2. If so, have the findings been reviewed?
  - 3. Can you see evidence of 'start again' syndrome?
  - 4. Have we provided adequate educational parental support?
  - 5. Can you see evidence how the learning from the Serious Case Review for Child and Family R has informed practice?
  - 6. What has worked well with this case?
  - 7. What practice could be improved with this case?
- Each case will be introduced by the Social Worker / Practice Manager, followed by input from partners, and a pulling-together of information around three questions:
  - What went well?
  - What can be improved?
  - What challenges / themes can be identified?

# What went well?

# Case 1

- The children are safe and their needs are being met.
- Two elder children are very settled and doing well and they are all attending school.
- Children's contact with parents is generally good.
- The children have a good relationship with their siblings. Contact is currently monthly but needs to be fortnightly.

# Case 2

- The child now has a permanent Social Worker and Practice Manager. Case management is taking place and dialogue continues. Communication with School is difficult at the moment due to School holidays but an appointment has been set up in September.
- Universal services for pregnant partner are included in the Core Group.
- The work done by the School to elicit the CSE disclosure was excellent.
- Social Worker has made good use of the chronology.

## Case 3

- Photos of home were taken on the first visit, providing a good record.
- The School have been consistent and proactive throughout.
- Response to risk has been quick and appropriate, in spite of later drift and delay.
- Communication between Core Group members is good and Multi Agency information is gathered and recorded appropriately.
- Everyone now has a good understanding of the lived experience of these children.

## Case 4

- Appropriate and timely escalation to Initial Child Protection Conference. Initial Assessment was good.
- Father has been engaged in the process.



## Case 5

- Communication, discharge planning. Health Visitor support.
- Police investigation and support.
- Positive progression of the plan.

# What can be improved?

## Case 1

- Two younger children are having problems and there is concern as to how the foster carer is meeting their needs.
- Delay with legal process and DNA testing.
- Neglect toolkit not used. A lot of the issues raised would have been picked up had it been used.
- Health Visitor indicates they visited the house but do not mention poor conditions. Bedrooms particularly bad, so sleeping arrangements not inspected.
- There is evidence that parent's word is taken at face value, therefore a lack of challenge and curiosity.
- 2015 chronology has significant gaps and lack of management oversight.

#### Case 2

- Whilst the school has done excellent work, they could have pushed Social Care harder.
- The allegations of sexual abuse were not referred until the end of the day, by which time the child had gone home.
- Why did the speech and language referral close when he was not brought to the appointment?
- Lack of engagement with the absent parent.
- Parenting assessment is needed especially in light of the partner's previous history.

#### Case 3

- Police handling of injury. Police notes states "reckless" rather than "malicious or intentional".
- No Graded Care Profile. This would have been helpful, especially in light of number of Social Workers.
- Health have records of a number of injuries sustained by children. They were not brought to immunisations and there is no record of whether they have seen a dentist.
- A proper assessment is missing. A lot of the first assessment was copied and pasted into subsequent assessments and signed off by a manager.
- No family group conference and no note of how the wider family can offer support.

# Case 4

- Lack of the voice of the child recorded.
- This case has already had three Social Workers since March and there is now going to be a fourth.
- Nursery is not in the Core Group, creating a blind spot. Health Visitor contact at four years old is minimal, and the Nursery would be able to advise on her progress and development.
- Father apparently has a record of gang affiliation, although this is not noted on the police audit.
- Case shows a lack of supervision which would have picked up on some of the issues identified.
- No mid-point review from the CP Chair, meaning the case is drifting.

# Case 5

- Medical notes took a long time to come through, slowing down the Police investigation.
- The decision to remove bail conditions was taken without the involvement of Social Care, leaving them on the back foot. Involvement of the Core Group would have been better.
- Children's Centre was advised that they didn't need to attend the conference. It was left with the Mother to contact and engage with Children's Centre if she needed to.

# What challenges/themes can be identified?

# Case 1

- Police information is very narrow in scope, needs to include information from other agencies. The Graded Care Profile is too wide ranging for Police use. Many officers are still not aware of it.
- Youngest children are now in second placement, approaching third. This is very disruptive.
- There is no note of support from Early Help but this could be due to lack of parental engagement.
- It was noted that the GP had declined to supply information as they were not happy with the reason for the request.



# Case 2

- A policy is needed to ensure that children in need are monitored through school transitions.
- Use of Pre-Birth and Parenting Assessments.

### Case 3

- Completion of parenting assessment at this stage is complicated by the fact that they are living with maternal grandfather who is parenting?
- Holiday hunger if these children are being primarily fed at school what is happening in the holidays? Social Worker
  notes that there is always food in the house and Mum says that she likes to cook but children are coming into school
  hungry. Eldest states she doesn't have time to eat as she has to get younger children ready for School.
- Need to support school to ensure that children can still attend even though they are currently resident in Kettering.
- No evidence of voice of the child in the audit process.
- Mental Health provision needed for Mother. She is at a different practice so Health Visitor has no access to notes. Mother had parental Domestic Abuse issues as a child which she is unwilling to address with a Counsellor.

## Case 4

- Neglect assessment was not completed.
- Domestic abuse work and assessment on Father haven't been collated into the child protection plan.
- There is no evidence of Mother engaging with alcohol services, increasing the risk of a relapse.
- Younger sibling is not currently registered with a GP, so will not receive routine healthcare and immunisations. Health Visitor is addressing this.
- Work with Catch 22 has been positive.
- How good will the handover between the Nursery and School be?

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- Children's Centre was advised that they didn't need to attend the conference. It was left with the Mother to contact and engage with Children's Centre if she needed to.
- Social Worker is confident that this is an isolated incident. How sure can we be of this?
- Grandparents are offering support have they been assessed? There is no record of their being previously known to Social Care.

# **Good practice**

- Schools playing a strong protective factor in cases and continuing to support and push the wider partnership for action and support.
- Evidence of good information exchange and onward action across the partnership therefore the practice is still too variable in Northamptonshire.
- Recent casework had shown improvement and better outcomes for the majority of these cases; albeit within the context of the above.