

## Case Mapping Exercise

### 6 Step Briefing

#### Child Am

##### The Background

Child Am is a particularly vulnerable young person with very complex needs. There is a history of going missing, allegations of sexual abuse, challenging behaviours, self-harm and suicidal ideations.

##### Safeguarding Concerns

Child Am posed a significant risk to themselves, however, due to their complex needs they did not “neatly fit” into a service for support. The family is chaotic and has moved many times due to historical issues which meant no agency had a holistic picture or understanding of the family, environment or as individuals within the family.

##### The Incident

Child Am was admitted to A&E on several occasions following suspected self harm episodes. Whilst this was not deemed most appropriate for their wellbeing, it was to safeguard them with no other options available at the time. A final admission resulted in an assessment where they were moved to a mental health facility.

##### The Review

This case was presented to the Serious Case Review Sub Group and whilst it did not fit the criteria for a Serious Case Review, it was agreed to undertake a Case Mapping Exercise to capture the learning. Agencies across the partnership engaged well in the process, contributing substantial information to aid the workshop, where robust multi-agency discussion led to identifying the learning and subsequent recommendations.

##### The Findings

- Due to this young person’s complex needs, they did not “fit” into any individual agency category for support. One agency even admitted to not knowing what to do with the young person. Subsequently this young person was repeatedly being brought to A&E and admitted, whilst this was far from appropriate the hospital felt they had no other option than to admit Child Am for their own safety.
- Lack of hearing this young person’s voice and lack of understanding of this young person.
- This family have moved many times and spent three years in a separate county. Some agencies do not have information from then so there is a gap in professionals understanding and knowledge of the family. Other agencies have limited information.
- Do not take parents comments at face value, triangulate and seek assurance – mother would constantly minimise Child Am’s issues.
- Mother would always be present or close by when professionals wanted to speak to Child Am.
- Two Strategy meetings were held on consecutive days – it is not clear why and the minutes from the first meeting were not available for the second. The meetings were also chaired by different people which led to inconsistency and duplication.
- The school tried to contact CAMHs following the incidents at school but were unable to contact anyone. On one occasion it was several hours before they were able to get any response.

### Recommendations

1. There is a gap in service provision for young people with complex needs. There needs to be a multi-agency pathway to manage young people with complex needs who do not fit into any one category of need and support.
2. Children and young people's voices must be heard and listened to. Professionals need to find creative ways to engage and understand complex young people who present with very challenging and difficult behaviours.
3. There is a gap when an appointment is cancelled the service relies on the parent to re-make the appointment. If they do not, the service is closed and young people can become lost.

### Good practice

Child Am's school went above and beyond to support this young person who presented extremely challenging behaviours. On each of the occasions Child Am was admitted to A&E, school staff accompanied and remained with them throughout until the mother attended.

When admitted to hospital, the ward always accepted the young person to keep them safe. The young person's behaviours were so challenging additional security staff were brought in to stop the young person from being able to abscond and also to keep the other patients and staff safe. Ward staff appropriately used the Self-harm pathway and Self-harm risk assessment.

There are clear multi-agency plans in place to support this young person with their future and to support other family members.

The multi-agency professionals meeting held following the young person's third admission to A&E was extremely well attended with a clear outcome and plan for the young person's safety.

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