7 Minute Briefing: Child Z

Date: February 2021

1. Background

7-week-old Child Z brought to A+E (mother's 1st and planned pregnancy).

CT scan showed brain contusions and additional fractures. Long term impact on development not known.

Child placed under an Emergency Protection Order, later discharged from hospital under Interim Care Order. Staged return to mother's care.

2. Good practice

- Non-accidental injury concerns at A+E were promptly identified and referred.

- Midwifery staff recognised the safeguarding risk to the unborn child when parents attended antenatal appointments.

-Health Visiting Service recognised the need for Universal Plus level services to Child Z.

3. Key events

- Father made voluntary disclosure at 1st antenatal appointment, that his first child was removed from his care and is currently under a Special Guardianship Order.

- Health visiting plan was for a Universal Partnership Plus service to be provided but no antenatal contact was made.

4. Lines of Inquiry

- What was the multi-agency understanding of the risks to Child Z at the time of the first referral?

- Was the quality of practice regarding pre-birth assessment of both Mother and Father effective?

- What information was known and subsequently shared about Father, his parenting capacity and possible risks to children? For guidance on information sharing, see: 2.4 Information Sharing | Surrey Safeguarding Children Partnership (procedures.org.uk)

5. Key Findings

- Missed opportunity to undertake assessments, especially in the absence of *known* risk factors (parents were married, employed, homeowners, no medical/ criminal history).

- Lack of professional curiosity and challenge around the information supplied by parents about father's first child.

- Lack of focus on role of fathers/ significant males.

- Information sharing issues between agencies.

- Importance of escalating concerns and knowing who to speak to.

- Questions raised about the security of Special Guardianship Orders

6. Recommendations

- Agencies to ensure GP practice is informed when a child is removed from care.

- The SSCP Escalating Partner Disagreements Protocol should be made widely available/ accessible.

-Issues of safety and wellbeing of the child should be explained to fathers and support mechanisms shared.

7. Learning points

- Make use of information available from past records to ensure that previous entries on a case file are read and their significance assessed.

- Procedure for Escalating Partner Disagreement issued and distributed by SSCP April 2020 : 7.2 Inter-Agency Escalation Policy and Procedure | Surrey Safeguarding Children Partnership

- Best practice guidance issued by the President of the Family Division June 2020 with regard to Special Guardianship Orders: Microsoft Word - 10 June 2020, final SGO report.docx (judiciary.uk)

- Be professionally curious!