

Learning the lessons from the case of Baby Peter Oct 2009







Great Ormond Street 1115 Hospital for Children



The Local Safeguarding Children Board - a sum of many parts





Working together for a safer London





Barnet, Enfield and Haringey WFS Mental Health NHS Trust







Great Ormond Street WES Hospital for Children





SCRs - The Statutory Context

 Serious Case Reviews are carried out when abuse and neglect are known or suspected factors when a child dies or is seriously injured – and when there are lessons to be learned about inter-agency working

(Working Together to Safeguard Children, 2006)





SCR Process Lessons

- Importance of independent chair; SCR panel membership
- Importance of being open vs defensiveness
- Willingness to critically challenge
- The focus is on learning not apportioning blame





Safeguarding is Everyone's Business

- Lessons from SCRs do not just relate to agencies whose work involves responsibility for child protection
- Everyone that has direct or indirect contact with families where there are children has a responsibility to those children and should raise concerns if they have them
- Critical role for universal services

"It is simpler to lift the telephone than live with the regret of not doing so" SCR Baby Peter





Only by working together....

- Child Protection work is complex
- We all work most of the time with shades of grey and need help from each other to give these definition
- In the context of a child protection investigation there is no reason not to share what you know or what makes you concerned – an assessment is a process that is constantly under review, not a one-off event

It's called 'Working Together to Safeguard Children' for a reason





Peter the Story

- Peter was born on 1st March 2006 and died on 3rd August 2007
- * Executive Summary on www.haringeylscb.org





Peter the Story

- We knew from the outset there were indicators of risk - indicators that individually and together warranted further investigation
- Every agency had opportunities later to review their assessment of what was going on and didn't
- Facts reduced in significance in the face of an adult's apparent willingness to comply and professionals' willingness to believe





Authoritative Practice

- Authoritative practice is about being a confident professional
- » Authoritative practitioners share information appropriately
- Authoritative practitioners contribute effectively to assessments, conferences and core groups
- An authoritative child protection plan is not a list of concerns; it clearly identifies risk, response and desired outcome





Healthy Scepticism

"Are they lying? Of course they are lying. Everybody lies." David Simon, creator of 'The Wire'





Why should we consider this?

- Fear is a powerful thing, especially when you are vulnerable
- We are the 'authorities' (do you tell the truth?)
- We can take their children away (myth/defences)
- Addiction is based on deception and takes many forms; you'll find most in any child protection investigation
- As a challenge to 'blind trust'





Healthy Scepticism

75% parents do not co-operate with services (includes disguised compliance & "telling workers what they want to hear") Brandon et al. 2009

- "Although perhaps not consciously a parent/carer...is testing the resolve of the safeguarding and child protection systems" SCR Baby Peter
- "It is crucial to be sceptical of the accounts which are given for any maltreatment of children ... they should be tested thoroughly against the facts"

Brandon et al; Biennial Review of SCRS 2005-2007





Past history – an indicator of present risk

- Understanding the impact of an adult's past history is crucial to any assessment of risk to their children in the present
- The effects of child abuse can be severe and last into adulthood
- Insight and resilience in relation to the past are indicators of capacity for good attachment

Research

"Any assessment should take account of past or potential patterns of behaviour or concerns" Brandon et al, 2009





Attachment is not the same as Interaction

- Do not confuse an apparent strong attachment with a good adult/child interaction
- Abusive parents can appear to have good interactions with their children
 – they may overcompensate or put on a display for strangers
- A proper assessment of the quality of attachment takes time and expertise





A 'Seen' child is not a Safe child

- How many case files record 'child seen'? What does that really tell you?
- Almost every child that has died in the last 40 years was 'seen' by professionals within days (or hours) of their death
- Are there other children in the family?
- Seeing a child is only effective if it helps you understand what it is like to be that child - ask yourself – what is it like to be that child, or better still, ASK THEM





Domestic Violence is a serious risk to children

- The presence of a child in a household where domestic violence is an issue should immediately alert you to risk. To see them and do nothing is unacceptable
- A child does not have to be hit to be harmed
- "Where there is DV in families with a child under 12 months old (including an unborn child), even if the child was not present, any single incident of DV should trigger a CP investigation"

London Child Protection Procedures 2007, 5.11.35





Involvement is not the same as Engagement

- At times, professionals failed to act because they thought other involved professionals would take action
- NEVER ASSUME
- Working together in child protection is like being in a relay team – make sure the information you hand over has been received and understood
- CP Plans must be clear about what a task is intended to achieve and who is responsible for what





Participation is not the same as Co-operation

- Don't confuse an apparent willingness to comply with an actual willingness to accept the need to change
- Rule of optimism more likely to prevail when staff feel under pressure
- Rule of optimism rationalises evidence that contradicts progress
- Solution focussed brief therapy is not appropriate for child protection work





Neglect is a Relationship Issue

Neglect is not just about nits

- It could be an indicator of a flawed adult/child relationship, about which you need to do something
- All neglect indicators stem from a parental choice to prioritise something else above their child's basic needs
- Use the indicators (head lice, weight loss, appetite etc) to question the relationship





Challenge low expectations

There is no such thing as a typical Haringey family and it is dangerous to think that way

- Many families in Haringey are vulnerable; it's easy to be too tolerant of levels of neglect and miss the individual risk indicators
- Learned optimism
- Want more for them than they want for themselves





Expectations of all professionals

- Keep a child's best interests are at the heart of what you do
- Always contribute to assessments, CP conferences and core groups
- Ensure clear, concise and timely recording
- Know which children you work with have CP Plans
- Keep practice policies and procedures up to date and tested
- Challenge your own assumptions





And finally...make time for the research

- Biannual reviews of SCRs www dcsf.gov.uk/research
- * BMA "Child protection toolkit for Doctors" May 2009 http://www.bma.org.uk/ethics/consent_and_capacity/childprotectionto olkit_isp
- www_C4EO org.uk (Centre for Excellence Outcomes in Children & Young People's Services
- www rip org uk (Research in Practice)
- www.scie.org.uk (Social Care Institute for Excellence)
- * www.nice.org.uk (National Institute for Health & Clinical Excellence
- www.ofsted.gov.uk
- www haringeylscb.org (Haringey Local Safeguarding Children Board)





Pick up the telephone

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