

### *Four children .... two were the parents*

#### **Background**

This briefing focuses on two young children who sustained non-accidental injuries in the autumn of 2015. The children, who were both under one year old and had health concerns, were being cared for by their teenage parents at the time. Both parents experienced troubled childhoods and were brought up in home conditions where violence and parental drug and alcohol abuse featured. As a result, their families were known to agencies in Birmingham.

The police investigation was complex and protracted and has only recently concluded, nearly five years after the original offences occurred. The mother pleaded guilty to child cruelty and was sentenced to a term of imprisonment, suspended for 18 months. The independent review concluded that the injuries to the children did not appear to be deliberate mistreatment or abuse, but a result of the parents' inability to cope. Most importantly, both children are doing well, living with their adoptive parents.

During the intervening period there have been significant improvements to practice and enhanced coordination of partnership intervention through the Children's Advice and Support Service and Multi-Agency Safeguarding Hub. Early help and support for parents and children is being delivered across the city through ten locality-based hubs. The findings from this review reinforce key learning for front-line professionals working with and supporting families with complex needs and the importance of securing effective early help and support.

#### **Key Learning**

- There were four children in this family, two of whom were the parents, all with their own needs and vulnerabilities. This was not always apparent in the work with this family which overwhelmingly focused on the baby to the detriment of the sibling.
- When the baby was discharged from hospital there was a lack of clarity within neonatal units on the criteria for holding multi-agency discharge planning meetings.
- Father did not engage with professionals and this lack of visibility should have been a warning sign in itself.
- Mother was viewed in her role as a parent and not as vulnerable in her own right, even when she was the victim identified in a domestic abuse referral.
- Several referrals were received within a short period, but these were viewed in isolation and did not trigger any further action.
- There was a lack of professional conversations which led to each incident being treated separately without taking the whole family history into account.
- When assessing parental capability, it is important to explore with parents the type of support they need and would accept, which would provide an opportunity for them to say they are not coping.
- When working with families it is important to create the right environment to enable parents who are experiencing domestic abuse to make a disclosure and have the confidence to seek help.
- Systems are now in place to respond to multiple new referrals over a short period of time, alerting Team Managers so they can provide guidance on further action required.

#### **Next Steps – What you can do**

- a) Circulate this 'Briefing Note' to all members of your team.
- b) Discuss the case at your next team meeting or supervision session and use the [PowerPoint Presentation](#) to make sure everyone understands and is able to apply the learning.
- c) Complete the e-learning training to improve your understanding and application of "[Right Help, Right Time](#)" – Delivering effective support for children and families in Birmingham.
- d) NHS hospital staff should familiarise themselves with their discharge planning guidance which was updated in September 2020.
- e) A Family Group Conference is a family-led planning meeting in which the whole family comes together to decide on a plan of action. For more information on Family Group Conferences [click here](#).

#### **Improving Practice**

- Family Group Conferences can help to improve shared decision making for children by supporting families' natural rights to make decisions about their own lives. This approach can assist in mitigating risk factors and build on the family's strengths and protective factors.
- Effective discharge planning from hospital settings must accurately assess parenting capacity, and, particularly in cases where children have significant health needs, multi-agency conversations should be held.