

Neglect Audit

This briefing highlights good practice, key learning, and areas for improvement from audits where children have experienced neglect. Steps practitioners can take to access information, training, and resources are included.

Good Practice

Communication Between Partner Agencies was Good

- Information sharing between social worker, GP and health visitor gave professionals a good understanding of one child's needs. For another child, communication between domestic abuse (DA) and mental health services and social worker supported planning and assessment.

Multi-agency Working was Evident

- In many examples agencies worked in partnership to support families. One child was able to safely remain at home and attend college as a result of good joint working.

Key Learning

Understanding of Intersecting Risks

- Most of the families were impacted by multiple risks and vulnerabilities such as mental health difficulties, DA, and substance misuse. Plans and assessments often failed to acknowledge the impact of these issues on parenting capacity and instead focused on presenting concerns like an untidy house.





Long-Term Repeat Involvement

- Many children were subject to numerous CiN and CP plans throughout their lives; concerns in some cases were reported for over 10 years. Often plans were repeated for each period of statutory involvement. There was drift and delay with recommendations from plans not always being followed, leading to children experiencing neglect for long periods. In these cases, escalation procedures were not consistently applied.

Improving Practice

- A **Chronology** can identify patterns of behaviour, evidence concerns, and ensure interventions are not repeated. **Genograms** tell us who is involved in the child's life and how their family functions. Guidance on chronologies and genograms is included in the **Neglect Toolkit**.
- Use the Graded Care Profile (GCP2)** to measure the care provided to children, monitor progress, and inform plans.
- Capture the Child's Lived Experience** by talking to them about their day-to-day life and by observing their presentation, behaviour, and relationships. This can tell us what their life is like and the impact of neglect. Guidance and direct work tools to support this are included in the **Neglect Toolkit**.

Next steps

-  Share the briefing with colleagues and discuss neglect at team meetings and practice workshops
-  Be aware of the impact of parents' needs (e.g. mental health, DA, substance misuse) on the care of their children
-  Use the **Neglect Screening Tool** to identify children at risk of neglect
-  Attend **GCP2 training**