

## The importance of early planning and continuity of care for children with complex health needs

The 3-year-old child in this case suffered a life changing head injury, requiring specialist care and support for the rest of their life. The medical team found evidence of old fractures and previous bleeding on the brain.

The child's parents were young, married asylum seekers. They came to the UK from abroad. They had been known to agencies since the child's premature birth. Prior to the incident there had been several safeguarding referrals made about the child, and there was a history of the child not being brought to medical appointments. The child had five unplanned hospital attendances, including three for significant injuries.

The severity of the child's injury led to an initial focus on palliative care. Whilst the child's prognosis improved, the complexity of their needs meant it took another two years before the child was discharged from hospital.

The child's injuries were thought to be non-accidental and the mother was subsequently charged and found guilty of child neglect.

### Key Learning

The review findings echoed learning from previous reviews:

- More could have been done to understand the child's lived experience and the parents' vulnerabilities as a young, migrant couple with no experience or understanding of the health, benefits or housing systems in the UK.
- Opportunities for a holistic assessment were missed, which could have resulted in better co-ordination of both early help and health services.
- Child protection processes weren't initiated, which delayed completion of parenting assessments.
- Convening of child protection Strategy Meetings could have led to better co-ordination of social work and hospital intervention, contingency and discharge planning.
- Absence of an agreement over the supervision and contact arrangements for the parents, meant that over time, the mother (perpetrator) became the child's main carer.

### Improving Practice

- Make sure you consider the experiences and trauma of asylum-seeking parents when assessing their parenting capacity.
- When working with asylum-seeking families, take the time to find out what services and support are available for their specific needs and whether they are actually receiving it. Please don't assume support is in place.
- Find out who else is working with the family so work is coordinated (this applies to early help and discharge planning in health). Is there a Lead Professional for the child who you can work with? If multiple agencies are working with the family and there isn't a Lead Professional, raise this! This is explained in the [Right Help, Right Time](#) guidance.
- It is so important that a child attends their health appointments. Make sure you understand and follow

your NHS Trust's 'Was not Brought' policy.

- Don't be afraid to ask questions and seek advice if you have ANY concerns about unexplained or suspicious injuries to a child. Non-accidental injury should be considered until there is definitive evidence of another cause of injury.
- It's crucial that all organisations follow child protection processes and that assessments, care planning and court processes take place in a timely way. Follow the escalation protocol if you don't think this is happening.

### Next Steps

- ✓ Circulate this Learning Lessons Briefing Note to all members in your team.
- ✓ Please visit the [West Midlands Strategic Migration Partnership website](#) for guidance and resources for services for asylum-seeking families.
- ✓ Familiarise yourself with the [Child Protection Medical Assessment Pathway - Toolkit for Practitioners](#) which outlines what to do if children have marks, injuries or bruising.
- ✓ Make sure you understand the Birmingham Safeguarding Children Partnership [Resolution and Escalation Protocol](#) and don't be afraid to use it if you feel the actions, inaction, or decisions of another agency do not adequately safeguard or promote the welfare of a child.
- ✓ Look out and sign up for the forthcoming Practitioners' Webinar on Thursday 7th March, where we will explore in more detail the emerging learning from this review and tips for improving safeguarding practice.