Neglect Strategy

2019-2024

Recognising, responding and reducing neglect in St Helens
“All children from St Helens are safe and inspired to achieve their best”

St Helens Safeguarding Children Partnership
We are pleased to present this refreshed and ambitious St Helens Safeguarding Children Partnership Neglect Strategy for 2019-2024.

Chronic neglect has a detrimental impact on the lives of children, young people and families. It has been a longstanding issue in St Helens, which will require a whole system approach to tackle, and strategic vision, oversight and accountability to deliver a meaningful change that improves outcomes for young people.

The purpose of this strategy is to set out how we will improve recognition of and response to neglect amongst all agencies involved in safeguarding and working with children and young people, but also how through a whole borough approach, we will start to reduce the prevalence of neglect within our communities.

Partners using this strategy will need to consider neglect in the context of other risk factors such as domestic abuse, substance misuse, adult mental health, child poverty and youth homelessness.

The partnership in St Helens is ambitious and determined to drive better outcomes for children, young people and their families, and delivery of this neglect strategy will be underpinned by our shared vision and principles of working together:

**St Helens Safeguarding Children Partnership Vision**

*Improving the lives of our children and young people by working together*

**Aim**

*All children from St Helens are safe and inspired to achieve their best*

**Principles**

- Make children central to everything we do
- Hear the voice of the child and understand their experience
- Work in partnership to protect children
- Trust, respect, challenge and be accountable to each other
- Learn and improve
- Communicate and share information within the partnership and their own agency
- Make a difference, demonstrate impact and celebrate success
- Ensure stability of membership

Through our Safeguarding Children Partnership Board, we will launch (including a launch in schools with young people) and then ensure delivery of this strategy, and maintain the vision and drive to make a difference to the lives of children, young people and families in St Helens.

Sarah O’Brien  Lisa Ellis  John Williams
WHAT IS NEGLECT & WHY DO WE NEED TO TACKLE IT?

Work already undertaken across Merseyside has used the definition of neglect from the Department for Education Working Together to Safeguard Children (2018) guidance, and we will adopt this definition in St Helens:

*The persistent failure to meet a child’s basic physical and or psychological needs, likely to result in the serious impairment of the child’s health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to:*

- Provide adequate food, clothing and shelter (including exclusion from home or abandonment)
- Protect a child from physical and emotional harm or danger
- Ensure adequate supervision (including the use of inadequate care givers)
- Ensure access to appropriate medical care or treatment

It may also include neglect of, or unresponsiveness to, a child’s basic emotional needs.

Howarth (2007) identified 6 classifications of neglect:

1. Medical neglect
2. Nutritional neglect
3. Emotional neglect
4. Educational neglect
5. Physical neglect
6. Lack of supervision and guidance

The impact of neglect will vary depending on the age of the child or young person. It is important that professionals and communities recognise this and understand the context and experience of neglect at different stages. The detrimental impact of neglect is not confined to young children, but occurs across all ages and can occur in all parts of our communities. It is useful to understand the experience of neglect in:

- Pre-birth
- Infancy (birth to two years)
- Pre-school (two to four years)
- Primary age (five to eleven)
- Adolescence (twelve to eighteen)

It is also important to recognise that children with special needs and disabilities have equal rights to protection from neglect, so practitioners need to be trained to recognise and tackle neglect in this vulnerable group of children.

It is essential that professionals have a solid understanding of neglect and how it affects development BUT recognising neglect (even with the definitions) is reliant on professional judgement and action. The prevalence of neglect and research indicates that even when there are concerns about neglect, adequate preventative action is not being taken to address it and this remains an issue in St Helens.
St Helens is significantly more deprived than the national average, and was ranked as the 36th most deprived local authority in England out of 326, in the most recent indices of multiple deprivation in 2015. Its relative position has deteriorated since the 2010 Index of Deprivation, where the borough was ranked as the 51st most deprived. Overall, a quarter of the population (41,264 people) now live in areas which fall in the 10% most deprived in England.

The local proportion of children living in poverty is estimated as 24.8% excluding housing costs, and 29.8% after housing costs are included. This equates to 10,023 and 12,038 young people respectively. There is also wide inequality across the borough; children living in Parr are about twice as likely to be in poverty as those in Rainford (40% and 19% after housing costs respectively).

There is evidence of a strong relationship between family socio-economic circumstances and rates of child abuse and neglect, with the likelihood increasing along with the level of economic hardship. In St Helens, this is reflected by the rate of children in need due to abuse or neglect being significantly higher than the England average (228.1 and 181.4 per 10,000 children respectively in 2018).

In 2014, during a full inspection of children’s social care, Ofsted highlighted a poor understanding of neglect in St Helens and a weak early help offer. Unfortunately, during a focused inspection in July 2018, neglect was once again highlighted as a significant issue in the borough:

“Social workers, managers and key professionals from other agencies do not demonstrate an understanding of the impact of chronic neglect on children or how drift and delay can
compromise children’s futures. This means that they do not take timely and necessary action to safeguard children.”

Given the prevalence of socio-economic and parental risk factors for neglect within St Helens, and the longstanding insufficient response to neglect from across the multiagency partnership, it is imperative that this strategy is ambitious and has an impact in addressing this issue for children and young people in St Helens.

**STRATEGIC AIM AND SCOPE OF THE STRATEGY**

Our overarching aim is to reduce the prevalence and impact of neglect on children, young people and their families. There will be 3 key strands to our approach:

- Recognising neglect
- Responding to neglect
- Reducing neglect

The scope for delivery of this strategy is the 3 statutory partners, as defined in Working Together 2018, and all the relevant agencies listed in St Helens Safeguarding Children Partnership documents. This strategy will require action to be taken at all stages of a child’s development, including pre-birth, and will require action from all partner agencies both statutory and non-statutory. It will also require the support of strategic and political leaders in St Helens.
WHAT ACTION WILL WE TAKE?

Objective 1: Recognising Neglect

Outcome: Practitioners in all agencies will be able to recognise the signs and impact of neglect when working with children, young people and families and know how to take initial and appropriate action.

Actions to achieve this:

- Establish a multi-agency training offer for neglect (combination of workshops, face-to-face sessions and online resources) so that partners recognise it is essential to identify neglect at the earliest opportunity, to ensure those at risk of or experiencing neglect receive appropriate, timely intervention.
- Through training and practice standards, ensure neglect is correctly categorised at referral and throughout interventions. Don’t confuse neglect with emotional abuse.
- Ongoing embedding of Graded Care Profile 2 tool as a framework for managing neglect.
- Evaluate current practice through audits and benchmarking against guidance and act on any gaps. We will seek feedback from children and parents during audit.
- Run a yearly campaign to raise awareness of neglect across St Helens communities; this will include raising awareness with children.
- Embed signs of safety across partnership to ensure we use a strengths-based approach and build resilience within families.
- Ensure Descriptions of Need and Early Help offer is well understood, as this is crucial to the management of neglect.
- Provide a timely Early Help Assessment and implement a clear plan for intervention and support for children and families, to manage risk and avoid costly statutory intervention.
- Establish an annual Safeguarding Partnership Board conference and have neglect as the first theme.

Objective 2: Responding to Neglect

Outcome: Each partner agency and their practitioners will know how to respond (promptly) to neglect to ensure children are safeguarded from exposure to chronic neglect and poor outcomes because of this.

Actions to achieve this:

- Ensure correct recognition and categorisation of neglect through training as outlined in Objective 1.
- Develop practice guidance for working with children and young people where neglect is present.
- Use Graded Care Profile 2 as a framework for appropriate response.
- Continue programme of Early Help workshops and have neglect as a theme of some of these workshops. Continue to roll out Descriptions of Need documents to ensure partner agencies know when Early Help is appropriate.
• Continue with current improvements in practice across Early Help, social work and other agencies; the journey to ‘outstanding’ will bring improved response to neglect and a reduction in the need for statutory intervention.
• Review referral pathways and timeliness of response to ensure when neglect is identified, it is acted upon swiftly.
• Each agency will outline how they will embed practice guidance and ensure learning about neglect is widespread in their organisation.
• Conduct audits to monitor progress in each organisation with loop closure where gaps remain.
• Through the new multi-agency Safeguarding Partnership arrangements, improve collaboration, professional curiosity, challenge and escalation across partner agencies, which will improve response and management of risk in neglect cases.
• Ensure where there are concerns about safety, the sharing of information between organisations is timely and effective to reduce risk of harm.
• Engage with children and young people to ensure their voice is heard and so that we can understand their daily lived experience when considering their needs.
• Avoid ‘start again’ syndrome by training professionals to consider historical information when making decisions, reviewing progress and developing plans to inform present position. Reviews should occur after significant change and at regular intervals.
• Liaise with local Higher Education Institutes to ensure pre-registration training for professionals covers safeguarding and neglect.
• Work with colleagues in adult services to ensure they recognise neglect in families and reduce gaps/silo working between adult and children’s services

Objective 3: Reducing Neglect

Outcome 1: Over the 5 years of this strategy, the number of referrals resulting in statutory intervention (Child Protection, Children in Care) for neglect will fall.

Outcome 2: Across the borough there will be supporting strategies and actions to tackle some of the underlying socio-economic and parental determinants of neglect, such as poverty, unemployment, alcohol and drug abuse and domestic abuse. The incidence of neglect will fall over the 5 years of this strategy.

Actions to achieve this:
• Education and training of professionals and communities (outlined in Objectives 1 & 2) will be pivotal to preventing neglect in St Helens.
• Agree a multi-agency data set to quantify prevalence of neglect across St Helens, so that this can be analysed and monitored as the strategy is implemented.
• Implement new and improved Edge of Care and Complex Safeguarding services.
• Embed the Signs of Safety model.
• The St Helens People’s Board to be sighted on the challenge of neglect and how other issues in the borough such as domestic abuse are causative factors. The People’s Board to ensure other relevant strategies and actions are delivered.
• Work with Public Health and Community Safety teams to tackle underlying determinants of neglect and ensure the impact of these challenges on children is understood. The main issues to address, that influence neglect across St Helens are:
  ▪ Domestic abuse
  ▪ Alcohol misuse
  ▪ Substance misuse
  ▪ Adult mental health
  ▪ Poverty
• Understand how the economic regeneration strategies in St Helens will help to improve employment and reduce poverty.
This strategy is owned by the St Helens Safeguarding Children Partnership Board. A strategic lead has been identified and through a subgroup of the board, a detailed plan will be developed to ensure implementation of the strategy and progress will be reported to the board.

Impact of the strategy will be measured by key indicators:

- Increase in categorisation of neglect as a reason for referral (reduction in other categories)*
- Reduce number of children on a Child Protection plan because of neglect
- Reduce number of children coming into care because of neglect
- Increase number of children and families supported at Early Help with neglect
- Reduce number of repeat referrals due to neglect
- Use of Graded Care Profile 2 and compliance with tool
- Children receiving help due to neglect will make good progress against plans and achieve good outcomes in school (including Early Years)
- School attendance (aim for improvements) and a persistent absenteeism (aim for reduction)
- Consider child obesity rates and tooth decay in children known to be at risk of neglect

*Note: it is recognised that in the short to medium term of this strategy, through improved recognition of neglect and better screening and assessment tools, there may be an increase in some indicators.
| Version Control |
|-----------------|----------------|
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