1 Background and Concerns

Mother has a history of significant mental health issues and from 2010 until 2018 was detained under the Mental Health Act. She was a previous child looked after and both parents had knife related offences. Father was thought to have learning difficulties due to a brain injury in his youth and there had been some concerns regarding mother and her level of cognitive functioning. Mother presented for all of her maternity care. A recommendation was made by the safeguarding midwife that a referral was made to CSC at 16 weeks, this did not take place until after baby was born. The baby was placed in a mother and baby unit in order to assess mothers' ability to meet his needs

2 Purpose of the Review

The purpose of a Line of Sight review is to identify learning for the multi-agency partnership which will strengthen the safeguarding system. Beyond individual cases reviews they also provide a window into wider systems (ways of working/processes) which may need to be changed. In this case it was felt that there was an opportunity for learning and practice improvements in several areas.

3 Key Lines of Enquiry

- To what extent practitioners used professional curiosity to explore mothers' previous experiences and the impact that this could have on parenting capacity
- To what extent father was visible to services and how his parenting capacity was assessed
- To what extent practitioners considered the wider family context
- To what extent covid-19 had an impact on service delivery
- To what extent practitioners triangulated information to make a holistic family assessment
- Agencies confidence around consent/thresholds and safeguarding procedures

Further information

- Graded Care Profile 2
- SCP Training
- Line of Sight process
- Threshold of Need
- Referral Process
- SCP Policies & Procedures
- The Professional Curiosity Tool will be published on the Safer NEL website when complete

O1 O2 O7 Children 14 Line of Sight O4 O5

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4 Key Practice Episodes

Expected /good practice

- Agencies worked well together following baby being born and the referral to CSC being made.
- Baby is safe and in the care of his parents in an assessment placement
 Areas for improvement
- Agencies involved in mothers care during pregnancy showed lack of professional curiosity despite them being aware of significant mental health history
- No consideration of father and his parenting ability given that he had been described as having a learning difficulty and had knife related offences
- The pre-birth pathway was not initiated as mother did not give consent to a referral to CSC
- No exploration of wider family dynamics given agencies felt paternal grandmother was controlling
- Lack of continuity of midwife during the antenatal period largely due to covid with mother seeing 9 different midwives in pregnancy
- Lack of information gathering and sharing, agencies failed to triangulate information which led to decision making based on self- reporting and lack of robust assessment
- Lack of understanding around consent, and what mothers lack of consent to a referral to CSC meant in respect of assessed need, thresholds and safeguarding procedures
- There was a gap in the safeguarding support loop between the midwives and safeguarding midwives whereby actions relied on the midwife reporting back to the safeguarding midwife
- There were missed opportunities to explore mothers needs by NAVIGO Plus when she
 was expressing that she felt she needed additional support

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6 Progress/Impact

- An action plan has been developed.
- There is an expectation that agencies will embed learning within their own organisation and assure the SCP that actions have been implemented
- Work has started in agencies in respect of improving the working knowledge of consent, thresholds and safeguarding procedures
- A professional curiosity tool is being developed to support practitioners in how to develop and embed a professionally curious approach to working with children and families
- Awareness raising will be undertaken in respect of agencies understanding of the pre-birth pathway

5 Learning

- There is a need for agencies to communicate with other key agencies as part of any assessment and to triangulate information to inform a holistic assessment
- Children and families would benefit from agencies adopting a professionally curious approach to think family, to explore
 family history including adverse childhood experiences, family dynamics, to seek evidence and clarification where selfreporting in order to support the assessment of need
- The need for knowledge around consent, thresholds and safeguarding procedures within agencies to be strengthened Lack of continuity of care in terms of change in workers (midwifes) is not supportive of the ongoing assessment process