

## 1 Background and Concerns

Sudden death of a 4-year-old child, (Child 27) family of white European origin, first language of parents was not English. 4 separate contacts into Children's Social Care made from 2019 to November 2022, 3 by the GP. The health visitor submitted an early help assessment June 23, the case was allocated to an Early Help, the plan focused on parenting support, play stimulation and attendance at health appointments, it closed in September 2023. Child 27 was known to have significant developmental delay, no speech, with delayed walking. He had 2 older siblings aged 9 & 13, and 2 adult step siblings. He was born in Grimsby and lived with his mother and siblings, father visited the home frequently. Child 27 attended nursery school.

## 2 Purpose of the Review

The purpose of a Rapid review is to share information and identify learning when a child has experienced serious harm (or death) as a result of abuse or neglect. The review considered the facts of the case, and identified learning and whether any improvements in practice are required as a result.

## 3 Key Lines of Enquiry

- Did services respond appropriately to the family's language and cultural needs?
- Was the lived experience of the child heard and understood by agencies involved?
- Did agencies recognise neglect and consider the impact of this on the child/family?
- Did agencies work together as per statutory guidance to safeguard the child/family?

## 4 Key Practice Episodes

### Expected and good practice

- The Health Visitor completed assessments over and above requirements and used professional curiosity to inform the Early Help Assessment.
- School captured and understood the child's lived experience and voice with the rapid review and provided a high level of pastoral support and intervention to

### Areas for improvement

- Examples of "good" practice were given were standard or expected practice rather than above and beyond.
- Understanding and awareness of signs of neglect
- Processes for managing children who are not brought to appointments.
- Agency awareness and processes when family's first language is not English.
- Understanding what life was like for the child family.
- Agency understanding and application of local thresholds, the quality of the assessment and plan



## 7 Further information

- ❖ [Neglect strategy](#)
- ❖ [SCP Training](#)
- ❖ [Line of Sight process](#)
- ❖ [Threshold of Need](#)
- ❖ [SCP neglect/ Policies & Procedures](#)
- ❖ [Professional curiosity tool](#)

## 6 Progress/Impact

- The early help strategy has been revised and launched.
- Neglect strategy is in place, SCP plan to embed it.
- Communication to agencies on accessing dental services and support for children.
- Neglect toolkit to be launched shortly and Neglect training being developed.

## 5 Learning (What needs to be done differently)

- Interpreters to be used for all contacts when English is not a person's first language – children and family members not to be used as interpreters.
- All staff to consider dental neglect and signpost/refer families to dental services when children present with decay. Information will be provided to agencies relating to the appropriate pathways.
- The neglect strategy to be embedded across all agencies and staff/services to support them in early identification and response to neglect as individual agencies and in partnership.
- Agencies to review their did not attend/was not brought policies to ensure children with emerging neglect concerns are captured.
- Agencies to complete holistic assessments, using professional curiosity and keeping in focus the voice, lived experience of and impact on the child.