# **ESSCP Learning: Child 1 Rapid Review**

## Background

- Why it matters



- In December 2021 the ESSCP Case Review Group asked agencies to undertake a 'rapid review' of information they held about Child 1.
- The rapid review was initiated following Child 1's mother being charged with their murder.
- •Child 1 required 24 hour care as their health needs were so complex. Child 1 was admitted to hospital a week before their death. Blood samples, taken during Child 1's stay in hospital, and following their death showed levels of a non-prescribed drug that contributed to the cause of death.

- Although the rapid review found there were no concerns about single or multi-agency working, and concluded that Child 1's death could not have been predicted or prevented, the ESCCP felt that it was important to remind professionals of the increased safeguarding risks for disabled children.
- The rapid review also reiterated learning from other local reviews such as 'the impact of parental mental health'; involvement of fathers/other significant males, and the communication of safeguarding risks.

# Questions to consider

- What might you need to consider when undertaking an assessment with a disabled child?
- How could you better identify, consider and work with fathers, or other significant males?
- How would you assess the factors that impact on a parents mental health?
- How do you ensure that there is a clear understanding across agencies about the needs of a family.

#### What to do

- •The ESSCP invite you to discuss some of the issues raised in this learning briefing in your team meetings or during group supervision. We encourage your responses to be included in team minutes and forwarded to the safeguarding lead in your organisation.
- When was the last time you used the <u>Sussex Child Protection and Safeguarding</u> <u>Procedures</u>? Did you know you can sign up for alerts when changes are made.
- Review the <u>East Sussex Learning Portal</u> for the latest multi-agency courses.

### Learning

- Children who have disabilities are at an increased risk of being abused compared to their non- disabled peers. They could be more vulnerable to abuse and/or less able to speak out if something isn't right. This could be because they: have additional communication needs; do not understand that what is happening to them is abuse; need intimate care or are isolated from others; or are dependent on adults for care.
- Extra steps are needed if we are going to be more effective in working with fathers and male partners especially with those where other evidence would suggest they might present a risk to children. Although there are challenges for service design and delivery, there are things that all professionals can do on a day to day basis to better identify, consider and work with fathers and male partners.
- Caring for a disabled child can be demanding and stressful and is likely to have an impact on all areas of a parent's life. The impact of caring on a parent's mental health will be influenced by a range of factors, such as: the intensity of care; the number of competing demands (such as paid employment and other family responsibilities); individual's coping skills and resources, and the support they and the cared for child receives from other family members, the wider community and formal services. If parents don't get the support they need these challenges may escalate. In extreme cases, children may experience abuse and/or neglect.
- It is important that we consider the terminology we use and explain any 'jargon' to ensure that people understand what safeguarding is and what their role is if they have any concerns. Different agencies and professions have different ways of understanding and describing needs and thus a complex range of terminology and acronyms are often used. If this terminology is not explained, it can mean that other professionals may feel disempowered and excluded, which in turn, may harm partnership working and ultimately affect outcomes for children.



