7 Minute Briefing on Q4 MACFA– Cases de-escalated from Child Protection Plans for babies born between April-September 2020

For further 7 Minute Briefings please see… https://www.sandwellcsp.org.uk/quality-assurance/learning-from-audits/

1 – Audit Process

Two different approaches were used; firstly via multi agency discussion forums to gain a broad understanding of the views of frontline practitioners, and secondly via the case file audit of 5 randomly selected cases.

The discussion forums were attended by 8 practitioners from across SWBNHS, SCT, the Voluntary Sector and Education. Case file audit tools were completed by SCT, Education, CCG, SWBNHS and WMP. No response received to the request by voluntary sector services.

2- Overview of the 5 cases

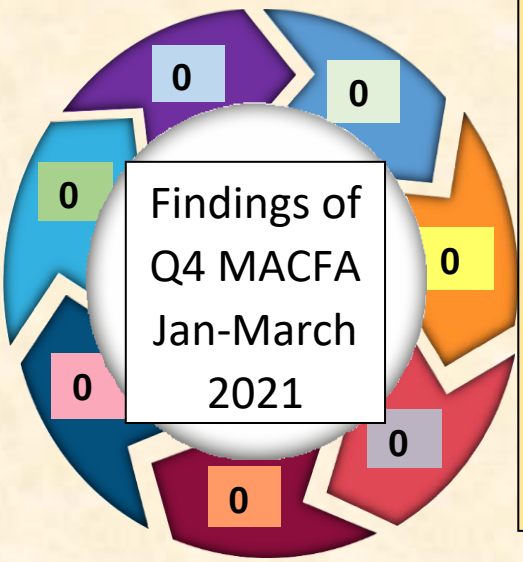
The cases comprised of 3 females and 2 males: 2 were White British, 2 were Indian and 1 was mixed race (Black Caribbean/White British). 1 of the cases did not meet the remit of the audit due to remaining on a CP plan throughout however valuable learning was identified.

Domestic abuse perpetrated by fathers was a feature in 4 of the 5 cases and poor parental mental health featured in all 5 with the father in 1 case having a severe diagnosed mental illness. Other issues included substance and/or alcohol misuse. Of the 4 cases stepped down to CIN, 1 case remained open for 2 months, 2 cases for 4 months and 1 for 11 months before closure to SCT.

7 – Recommendations

3 - The SCSP to identify a creative way, such as a drama production, to reflect the core learning and recurring practice messages to engage a group of multi agency practitioners to understand barriers and enablers to them applying practice messages; evaluation of event to inform future approach to learning and development/practice improvement.

4 - The QPP sub group to consider and respond to the feedback provided by the Independent Scrutineer on multi agency audit process.



3 – Audit Headlines

Stepdown thresholds applied correctly according to the available information.
Agencies had risen to the challenge of delivering services during COVID-19.
Evidence of a range of support services available to children and families.
Evidence of the valuable contribution schools make with relationship based work.
Recurring themes identified were: short notice requests to attend meetings, gaps in sharing of meeting minutes/plans, impact of high staff turnover (SCT particularly), quality of pre birth assessments and birth plans

4 – Audit Headlines

Voice of new baby sometimes 'lost' amongst needs of older siblings and needs equal consideration.
Change to a 'whole family' perception needed – in DA cases the onus was placed on mother to safeguard when it was father who posed the risk.
Where both parents are actively involved their joint responsibilities need to underpin planning.
Coordination of support ended when SCT closed the case – agencies need to continue to work together and share information to support with sustainability of the progress made.
Stronger focus needed on assessing the impact of poor parental mental health on parenting capacity which should be explicit in CP plans.
Understanding how culture may impact on views about mental health and greater links with Adult Mental Health services would assist this.

5 – Independent Scrutineer Reflections

Some partners e.g. Probation and Adult Mental Health Services had significant involvement in some cases which had not been identified when scoping the audit – the Business Unit should reflect on arrangements to identify agencies.
Some partner agencies were invited to contribute but did not - how to secure engagement in future audits should be confirmed with their commissioners.
The audit process does not currently involve views of parents. Securing the views of parents/children should be built into the scope of future audits and which could be a task for the independent scrutineer.
Consideration could be given on inclusion of frontline staff in completion of the case file audit tool for the opportunity to reflect on practice and identify strengths and areas for development in respect of single and multi agency working.

6 – Recommendations

1 The SCSP to gain assurance via the gathering of information about the current single and multi agency training offer in respect of parental mental health to better understand how practitioners and front line managers are equipped to assess and support parental mental ill health. This will inform the development of new learning opportunities as required.

2 - The SCSP to share the findings in relation to stepping down from statutory services with the Early Help strategic group and request an assurance report on the current pathway regarding ongoing coordination of support when statutory work ends.