

SECTION 3: EARLY INTERVENTION AND PREVENTION

3.4: NEGLECT PROTOCOL

INTRODUCTION

Assessing and minimising neglect within families is a complex and challenging task. The nature of neglect is of multiple issues, long term need without necessarily an event that triggers decisive intervention, and recognition that understanding the situation in order to intervene is often very difficult. The greatest uncertainty is often in deciding how serious a situation is and in identifying ways in which to intervene in order to improve outcomes for children.

The proposals outlined below are intended to provide a means of assessing the detail of neglect in order to respond in a more effective way to identify needs, and promote children's welfare at home via co-ordinated multi agency support.

KEY CHALLENGES OF NEGLECT

- Neglect is not an event, but rather an absence of appropriate care, often over a long period of time.
- The causes of neglect vary, but are crucial in understanding how to intervene:
 - Physical needs → practical help.
 - Parenting knowledge/skills → training and support.
 - Social contract/networks → community links and support.
 - Breakdown or absence of a relationship of care → focus on relationship issues.

It is vital to respond to the causes of neglect not just to the symptoms.

Time limited intervention processes often work against the needs of neglect cases, where needs are long term.

Maintaining neglected children at home will mean for a few that “social care” i.e. indefinite professional support is required for the duration of their childhood.

Perhaps as a result of the complexities of neglect, professional anxiety exists when defining the seriousness of a situation and at what point it becomes child protection rather than prevention.

This strategy will assist in clarifying that threshold, but will also promote the use of protection only if other intervention has not resulted in a sustainable level of “good enough” care, and improved outcomes are believed to be likely with a higher level response.

KEY TARGETS FOR THE NEGLECT STRATEGY

The aim of the strategy is to improve Stockport's ability to assess neglect, and to improve the effectiveness of our response in order to achieve better outcomes for children living at home.

There are, therefore, a number of targets:

- A more effective means of assessing neglect that will:
 - offer opportunities for early intervention with needs clearly identified.
 - Provide clarity in complex high risk situations in order to plan an appropriate response.
- More effective multi agency intervention in neglect cases based on improved clarity of need and level of seriousness.
- Intervention via child protection registration or care proceedings only if social care options alone are no longer believed to be in the child's best interests.
- Commitment to long term social care input for a minority of very serious neglect cases where removal from home would not be in the best interests of the child.

ASSESSING NEGLECT

When assessing neglect there are two crucial questions:

- In what way or ways is a child being neglected (what quality of care is being provided)
- Why is a child being neglected

A tool known as the "Graded Care Profile" was developed in Luton in 1995. It is a practical tool for assessing the details of care being provided to children, i.e. the quality of care. It does not address the question as to why there are gaps in that care.

Stockport plans to use the Graded Care Profile to assist in the identification of the specific strengths and weaknesses of care being offered within a family. It will be used as part of Stockport's assessment and intervention process outlined in this protocol.

The Graded Care Profile defines four areas of care which are broken down into sections:

- | | |
|----------|-----------------------|
| Physical | - Nutrition |
| | - Housing |
| | - Clothing |
| | - Hygiene |
| | - Health |
| Safety | - In carer's presence |
| | - In carer's absence |
| Love | - Carer response |

- Mutual engagement
 - Stimulation
- Esteem
- Approval
 - Disapproval
 - Acceptance

It is a descriptive tool which is graded to define the seriousness of the concern.

USE OF THE GCP

The GCP was designed for use with parents / carers but could also be completed as part of a professional discussion with gaps in knowledge highlighted for further assessment. Completion of the assessment is as follows:

- Use the coding manual to answer each sub area in terms of the level of care being provided. Ideally discuss this with the parent / carer but if this is not possible, use your own perspective. The gradings although subjective are detailed enough to be reasonably accurate
- Score the items for each sub area on the full reference sheet
- For each total sub area e.g. nutrition you need to record an average score on the scoring sheet (GCP scale). To do this score each item of the sub area first then; if no item scores above a 3, use the most common score as the answer for the sub area. If there is even one score of 4 or 5, use that as the score. If the items are evenly split, use the higher score for the sub area.
- Use the same principles to achieve an area score for the four areas of care:
 - Physical
 - Safety
 - Love
 - Esteem
- Record in the comments box areas of particular strength or weakness
- Use the targeting box to highlight the very specific areas of weakness which need to be priorities for initial intervention e.g. A/1/b = physical care / nutrition/ quantity of food
- For areas targeted, set a target score and share with the main carer what needs to happen for this to be achieved.
- Agree an intervention plan (single or multi-agency) based on the GCP outcome and outcomes of the common / core assessment which will have answered the questions as to why the neglectful care is happening, and what family and community support may be available. The plan will therefore include:
 - Clearly targeted areas for improvement
 - Professional support and monitoring arrangements
 - Family and community support as appropriate

- Establish a timescale for full review of the profile in line with specific improvement targets agreed.
- Agree the outcome that will happen if improvement is achieved and also the outcomes if no improvement or even deterioration is observed
- Review the GCP at the agreed time and action the outcomes according to the improvement or deterioration in care as assessed.

Remember: The purpose of completing the profile is to clarify areas of concern in order to plan appropriate single or multi-agency intervention.

USING THE GRADED CARE PROFILE WITHIN STOCKPORT'S ASSESSMENT AND INTERVENTION SYSTEM

- If concerns around potential neglect are identified, the professional concerned should complete a common assessment using the common assessment framework.
- Using that assessment, if a single agency response is appropriate, the GCP may be used in conjunction with a carer to identify the specific neglect concerns and plan the improvements and intervention needed. The GCP needs to be used in the context of information from the Common Assessment
- If a multi-agency response is needed a Children In Need meeting should be called and a support plan established as outlined in the relevant practice guidance. For cases where neglect is an issue the plan should include completion of the GCP by an agreed professional plus the carer, with assistance from other professionals as necessary. The completed GCP should then become part of the CIN review meeting in order to assist the planning of effective intervention.
- For cases where the level of neglect is sufficient to require a referral to Children's Social Care or a section 47 enquiry, the GCP should be used as part of the Core Assessment of need by extending the detail of the parental capacity section.
- In cases of severe neglect the assessment will need to make recommendations about a possible child protection response. In order to do so, the following questions need to be answered.
 - Can long term care for these children be "good enough" if long term professional support is provided and are the family willing to accept such support?
 - Is child protection registration essential to make a difference to the outcomes for the children?
 - If children are at risk of being removed from the home is their long term outcome likely to be better than if they remain at home with support?
- If the outcome of the assessment and intervention is that an initial child protection conference is required, the completed G.C.P. should be provided for the conference as an appendix to the initial conference report, and will be used as a point of reference when discussing the concerns in that meeting. The updating of the G.C.P. would then form part of the multi-agency child protection Plan

- For cases where long term neglect leads to the initiation of Care Proceedings, the completed GCP should form the writing of the initial court report and should be available to the court in order to evidence the actual concerns raised.

The primary purpose of the GCP is to identify with carers the areas of concern and effect improvement in the care of children via agreed plans. However, if this is not achieved, the GCP becomes an effective tool by which to evidence child protection concerns for registration or even care proceedings in order to achieve improved care for children via alternative methods. Professionals need to be confident that such intervention will offer improved outcomes and to actively consider a plan to offer long term intervention at home as an alternative.

