

Wigan Safeguarding Children's Partnership 7 Minute Briefing – Child R

Background

In 2017 Child R was sharing a bed with parents and was found deceased face down in the mattress under the duvet at the foot of the bed. Some risk factors were present in relation to sudden and unexpected infant death. These included parental smoking, including during pregnancy, low birth weight, and parental substance misuse. Following the birth of Child R, a safe sleeping assessment and action plan were completed. At the time of Child R's death the family were subject to Child in need intervention due to mothers self disclosed substance misuse. She disclosed this during her pregnancy with Child R for which she requested support.

Complexities in the case included use of illegal substances alongside prescribed and non-prescribed medication. The prescribed medication was known to cause drowsiness. Maternal urine screens taken by Substance Misuse Services in early 2017 and then 14 days after Child R's birth were positive for a range of illicit drugs. This information was available to Substance Misuse Services but seemed difficult to retrieve and was not shared with multiagency partners. No assessment of father's substance misuse was undertaken, despite historical knowledge of substance misuse. There was also domestic abuse, mental health issues, a "hidden" father and isolation from other family members within the case.

What was the Learning?

- Where parents both have an active role in caring for children, parental capacity should be assessed jointly as well as individually.
- Professionals should understand and recognise the significance of missed medical appointments, especially those in relation to a child.
- Agencies need to re-evaluate how historic safeguarding information is stored and shared.
- Interventions should be based on clear action plans to prevent service response focusing on crisis intervention.
- Timely meetings should be arranged based on risk and all relevant professionals should be invited. Clear timescales should be in place.
- Urine results and compliance with drug treatment programmes should be used to compliment self-reporting of substance misuse. The results of screening tests should be shared promptly with Children Social Care.
- All relevant multi-agency partners should play a key role in safeguarding processes / meetings including those from adult services.
- Prescribing from multiple services should be co-ordinated and effective information sharing should be used to promote safe prescribing.
- Hospital discharge planning meetings should always take place for cases where families meet Child in Need criteria.
- All professionals have a responsibility to use the Wigan Children's Safeguarding Partnership escalation policy, if they feel that a risk is not being addressed.

Why is this important to Wigan?

The Deal for Children and Young People promotes getting to the heart of a problem and preventing children and young people from having to repeat their story, so that we can get interventions right

the first time. We should be asking the right questions, to allow us to be critical and innovative in our work with children and families. The deal encourages progression in order to build resilience and better outcomes faster.

What can we consider?

- What action is taken by your service where “significant” appointments are missed?
- How is historic information relating to safeguarding stored in your service, is there a framework in place for effectively sharing this information to support the assessment of other agencies?
- How are you encouraged / supported to be professionally curious when working with families?
- How does your service gather information from other partner agencies on their involvement with an individual or family?
- How does your service give due consideration to all individuals with a caring role for a child?
- Do you know about the Wigan Safeguarding Children’s Partnership escalation policy and how to raise a concern?
- Do you understand your role in the CIN process? Can you undertake any training to enhance your knowledge?

Want to learn more?

Greater Manchester Procedures: [Children of alcohol and substance misusing parents and carers](#)

Greater Manchester Procedures: [Safer Sleep](#)

Greater Manchester Procedures: [Parents with Mental Health difficulties](#)

Information from the Lullaby Trust: [Safe Sleep Guidance](#)

Information on: [Wigan Safeguarding Children Threshold of Need](#)

Information on: [Wigan Safeguarding Partnership Escalation Policy](#)

Information on: [Learning from Serious Case Reviews - Disguised Compliance](#)

Information on: [Learning from Serious Case Reviews - Hidden Men](#)