

Torbay Safeguarding Children Board

Think Family Protocol

Version: 1

April 2015

Keeping children safe is everyone's responsibility

1. Introduction

- 1.1 The Children Act, 2004 states unequivocally that services should be working together around the needs of children, young people and their families, sharing information more effectively leading to earlier identification and intervention. The needs of parents/carers should not be seen in isolation from those children and young people. This is one of the key tenets of the government's Troubled Families Programme and this protocol can be viewed as an initial step towards 'mainstreaming' that approach across a range of services in the longer term.
- 1.2 A proportion of adults known to the mental health, Probation, substance misuse, learning disability and domestic violence services have children. In common with the population as a whole, most of these parents are committed to their children and want what is best for them. The presence of additional vulnerabilities for adults as parents / carers does not automatically preclude the possibility of good parenting and the emphasis must be on working together to assess need/risk where appropriate. What is important is thinking about the individual (adult or child) and their family during assessment, care planning and service delivery.
- 1.3 However, a number of these children will be known to services as 'Young Carers' and this group in particular are vulnerable to a range of risks including under achieving in school, poor mental and physical health and neglect. It is important that professionals working with them also work closely with their parents to ensure that the inevitable tension between their respective needs is not resolved to the detriment of the children's welfare and safety.
- 1.4 The reforms contained within the Children and Families Act (2014), with its mandatory 26 week deadline for Care and Supervision Proceedings, puts the onus on Local Authorities to make a thorough assessment of risk as possible in a shorter period of time and therefore improved co-operation leading to more proactive input from services working with the adults is critical. It is essential that every area of risk is assessed before a final decision is made about the future of a child.
- 1.5 This protocol provides guidance for professionals working with both adults and children on working together to deliver a seamless service that addresses the needs of families affected by such issues. However, the child's needs and safety are paramount and, in the event of concerns about a child's safety, the Torbay Safeguarding Children Board – Professional Differences procedures must be followed.
<http://www.devonsafeguardingchildren.org/documents/2014/12/tscb-professional-differences-escalation-policy>
- 1.6 A recent Ofsted and Care Quality Commission thematic review identified that in some cases parents or carers had both mental health difficulties and substance misuse problems and both adult services were involved.

Domestic abuse was also a common feature in many cases. (Ofsted: What about the Children? March 2013).

- 1.7 A Serious Case Review published in 2014 in Torbay concerned the death of two children where the mother had underlying mental health difficulties and who had been a victim of domestic violence. One of the findings from this serious case review has been the need for a better and more joined up approach to multi-agency risk assessment in such cases which takes account of the impact on children and young people of matters which affect the health and functioning of significant adults.
- 1.8 Recent Domestic Homicide Reviews (DHS, June, 2014) have reached similar conclusions, highlighting poor communication between agencies leading to 'compartmentalised' assessments which did not adequately ascertain the level of risk. There were failures in linking the disturbed behaviour of children in school to what they were being exposed to at home and relatively minor incidence of domestic violence were looked at in isolation rather than as they should have been - cumulatively. This would have increased the level of perceived risk and crossed the threshold for safeguarding intervention for both the children involved and their mother, the immediate victim, the latter being key to the former in this case. More broadly, whilst the needs of the child must always take precedence, this does not always mean treating them separately to the adult. In other words, getting timely, appropriate help for parents or carers is often the most effective means to support and protect their children.
- 1.9 The report, *An Inspection of the Work of Probation Trusts and Youth Offending Teams to Protect Children and Young People* (August 2014) undertaken by HM Inspectorate of Probation in response to findings from mainstream inspections of youth offending and probation work found that many practitioners did not view work to protect children as a core task and often operated in isolation, failing to exchange information with other agencies towards making more effective joint assessments. It recommended that senior managers in probation and youth offending services engage more at a strategic level with other agencies in order to ensure that the protection of children is paramount throughout every aspect of their work.

2. Purpose

- 2.1 The purpose of this protocol is to formally affirm the commitment to effective collaborative working through ensuring that there is a clear system in place for Risk Assessing the impact of parents / carers on their children based on good information sharing amongst the range of adult services who work with them, and to broadly outline the areas that need to be covered. In particular it relates to issues of adult substance misuse, adult mental health, domestic violence and anything else that may impact

on the adult's capacity to function properly and could therefore increase the risk to the child.

- 2.2 Recent policy has placed a growing emphasis on supporting adults in their parenting role. This was crystallised by the findings of the Reaching Out: Think Family Review (Social Exclusion Taskforce, 2007), which made a clear commitment to ensuring that both adult and children's services support whole families as well as individuals. (Social Care Institute for Excellence, 2009). The Supporting Families Programme promotes this as a fundamental principle and in Torbay this has been incorporated into their broader Early Help Strategy. There is much that other services can learn from this approach. Only when the needs of the whole family are assessed together can the best outcomes be achieved for both the children and the adults involved.
- 2.3. This protocol can therefore be viewed as a first step towards fundamentally changing the way a range of services work with families, through better information sharing, more collaborative interventions and the right level of priority given to the most vulnerable members of the group. It is consistent with the Torbay Safeguarding Children Board and Torbay Safeguarding Adults Board procedures and is in accord with the South West Child Protection Procedures, which promote a holistic approach to managing risk.

3. What we need to achieve:

Main Aims: ***all agencies taking responsibility for:***

- Carrying out robust risk assessments of children
- Effective Joint Working
- Appropriate Information Sharing
- Appropriate Referrals
- Collaborative assessment and care planning
- Co-ordinated service delivery for parents/carers and children whilst keeping the needs of children paramount.

- 3.1 To provide an environment for joint assessments to be considered that ensures the safety of children whose parents have additional needs and vulnerabilities it is necessary to have:
- Risk Assessments carried out by all adult agencies which specifically consider the needs and safety of the children and a transparent process in place that enables escalation to Children's Social Care when there are concerns serious enough to think that 'significant harm' may be caused. Significant harm is defined by Section 31 of the Children Act as "ill treatment or impairing of health and development" and includes sexual, physical and emotional functioning. All professionals

working with families need to fully understand the concept and be clear on what to do when they come across victims of it.

- Excellent communication supported by clear channels between services.
- A good understanding of the impact of additional parental vulnerabilities on parenting and children
- Pro-active joint and multi-disciplinary working across services and organisations
- A non-stigmatising service that encourages social inclusion for all users.
- Clear and accessible details of each agency's referral and assessment procedures, including thresholds and timescales.
- A robust framework of quality assurance by outlining the service standards expected from each agency and the procedures for addressing any issues that may arise.
- *This will lead to the following for all agencies that have a role working with adults.*

4. Adult Mental Health

- 4.1 Devon Partnership NHS Trust workers will assess how the needs of the adult impact on the welfare of the children and how the responsibilities and pressures associated with caring for the children in turn impact on the mental health of the adult. An assessment will be made as to the long term prognosis of the adult following ongoing treatment and contingencies put in place for both adults and children between all of the agencies involved through good communication if there is a relapse after a period of time.

5. Drug and Alcohol Dependency

- 5.1 Drug and alcohol workers will ensure that the impact on the children are fully assessed, including the potential for relapse following rehabilitation and how the responsibilities and pressures associated with child care can contribute to the adult's addiction and potential for failure to maintain initial good progress in defeating it. Again, very good communication is required as the input of respective services ebbs and flows reflecting immediate need. It is imperative that when one service has to become involved again, other relevant services are informed and the intervention properly co - ordinated.

6. Adult Social Care and Adults with Learning Disability Service

- 6.1 Adult Social Workers will always consider the wellbeing of children in the household, routinely recording basic demographic data, including schools and GP. The vulnerability and needs of the adult will be considered in relation to the children and vice versa, with links made to other services that may be involved or appropriate referrals if they are not. The same will apply to those working with Learning Disabled adults; in particular focusing on the cognitive capacity of the parent/carer and whether this is sufficient to provide the appropriate level of physical, emotional and social care. Those adults who have babies or very young children will require a focused risk assessment - first initiated at pre-birth stage. Although the standard of care that an Adult with Learning Difficulties can be expected to provide only needs to be that which is considered 'good enough', at no times must the right of the adult to be a parent override the right of a child to be kept safe. When it is suspected that this may be compromised, Adult Learning Disability Social Workers must carry out a full risk assessment, which will then contribute to that being carried out by Children's Social Care. Ideally these should be done jointly.

7. Children's Social Care

- 7.1 Children's Social Workers will routinely assess and record whether an adult has additional vulnerabilities and link accordingly with other services involved. The children's needs should be considered with this important factor in mind. If the plan is for a child to return home following a period in care or discharge from hospital then this should be discussed with the relevant adult service involved and a joint risk assessment carried out. The same applies to unborn babies where all relevant adult services need to contribute the assessment in order to inform the planning and accurately determine the level of risk.

Those children with caring responsibilities should be given a particular focus and an assessment made by the Young Carer's Service.

8. Health Visiting and Maternity Services

- 8.1 Health Visitors and Midwives can play a pivotal role in the lives of young children and it is essential that they are attuned to the pressures and tensions within the home and the needs of the adults that reflect these. They should be liaising closely with any other services that are involved and carrying out risk assessments if concerned, including pre - birth if necessary. Practitioners should be fully aware of this and have received the requisite training accordingly.

9. Probation and Youth Offending

- 9.1 Managers of services working with offending young people and adults need to ensure that practitioners clearly understand the importance of their role in respect of child protection, the critical importance of sharing information accordingly and how to do so.

10. Information Sharing and Confidentiality

- 10.1 As a general rule, personal information that agencies hold on a client is subject to a duty of confidentiality and cannot be shared with third parties. However, the overriding principle is that the safety of a child's welfare is paramount.

- 10.2 Good information sharing is a crucial element of successful interagency working, allowing professionals to carry out their statutory obligations and make informed decisions based on accurate and up-to-date data, thus improving outcomes.

- 10.3 Ideally consent should be obtained before any information is shared. However, it may not be necessary to seek consent if:

- it can be legitimately implied from the nature of the referral
- it is inappropriate because there is a statutory duty to share
- it may be unsafe to seek the consent (i.e. when this would place a child at greater risk)
- it causes unjustifiable delay in an investigation
- it would prejudice the prevention, detection, or prosecution of a criminal case.
- Detailed guidance can be found in *Working Together to Safeguard Children (2015)* and *'What to do if you are worried a child is being abused' (2015)*. Also - The Golden Rules.

11. Referral and Assessment Procedures

- 11.1 All professionals should have access to the following documents/policies:

- What to do if You are Worried a Child is Being Abused 2015
- Framework for Assessment of Children and their Families
- Working Together to Safeguard Children 2015
- No Secrets, 2000
- Recovery and Wellbeing Coordination (including Care Programme Approach) Policy C05, Devon Partnership NHS Trust
- 'What About the Children?' (Ofsted, 2013)
- All links in the Useful References section, below.

- 11.2 There are a range of referral pathways and processes in Torbay for the different services available such as Mental Health, Early Help, Children's Social Care (via the Multi Agency Risk Assessment Hub - MASH), Adult Social Care, Drug and Alcohol Team, Multi Agency Public Protection Arrangements and Multi Agency Risk Assessment Conference. Initially, referrals to Children's Services are determined through use of the Threshold Tool and tracked through the MASH which decides the level of seriousness and whether it warrants Early Help or a statutory service. All agencies are able to initiate an assessment using, where appropriate either the Safeguarding Hub Enquiry Form (SHEF) or Early Help Referral Form. The details concerning all of these processes and the ongoing management of such cases are clearly described elsewhere (see links, below) and do not require re-stating here.
- 11.3 There are also a number of formats for assessing risk, including those carried out by the Youth Offending Team, Adult Social Care, Mental Health services, those for Domestic Violence (CAADA, DASH, RIC), Neglect (Salford Graded Profile), etc. They are not effectively integrated and lack a collective understanding of risk thus leaving a potentially dangerous gap that impacts on the efficacy of joint working in Safeguarding cases.
- 11.4 The Torbay Safeguarding Children Board has agreed that we will implement the Signs of Safety model across the partnership and this will form the basis of collective understanding and pooling of information to inform risks to the child or young person.

12. Joint Working and Joint Assessment.

- 12.1 When an assessment of a child is undertaken, Torbay Children's Services will be the lead agency, but working closely with the other services involved (Working Together, 2015).
- 12.2 All assessments should be carried out in line with domains of the Framework for Assessment of Children in Need and their Families ((DOH, 2000):
- child-centered;
 - holistic;
 - outcome focused;
 - build upon strengths;
 - informed by evidence, and;
 - ensure equal opportunities.
- 12.3 If concerns are such that there is a risk of significant harm, then the matter should be referred for a section 47 investigation. A strategy meeting should be called and Children's Services should seek to ensure that relevant areas of Adult Services are fully represented.

- 12.4 The 'think family' approach requires a high level of joint working to be effective and this needs to be built in to all planning from the start. Joint supervision and joint visits should become standard, but with clearly defined roles and predicated on good, regular communication between workers and their managers.

13. Resolution and Disputes

- 13.1 It is essential that good working relationships are maintained between professionals and that any potential for misunderstanding or tension is understood and recognised at the earliest opportunity and resolved.
- 13.2 Where there is a difference of opinion regarding role, responsibility or support package, steps should be taken to resolve these informally. If resolution is not possible, then the matter should be escalated to senior managers utilising the Professional Differences procedure formulated by the Torbay Safeguarding Children Board.
- 13.3 The outcomes of the discussion will be communicated to all parties and recorded on the relevant case records. If the matter cannot be resolved by senior managers it should be referred to the relevant Head of Service.

14. Workforce Development

- 14.1 The importance of multi-agency training cannot be emphasised enough. Adult and children workers attending safeguarding training together, not only encourages practitioners to understand the issues from all perspectives but also fosters a more collaborative approach for the future. As a minimum all workers at Level 3 including within an adult setting should be involved in multi-agency training.
- 14.2 It has been recognised that large numbers of staff require safeguarding training. As a positive response, e-learning has been developed for level 1 to meet the demand.
- 14.3 The whole workforce should be aware of safeguarding adult and safeguarding children thresholds.

15. Management, oversight and supervision

- 15.1 To ensure that safeguarding children is a priority it is essential that managers and/or supervisors of all staff have appropriate training to understand specific issues that may arise and that safeguarding is discussed at all supervision sessions.

- 15.2 Within supervision managers/supervisors should be aware of stereotypes and prejudices which exist around adults who use drugs or alcohol, experience poor mental health or have additional needs. Professionals should be aware of different family patterns, lifestyles and child-rearing practices which can vary across different racial, ethnic and cultural groups. However, all professionals must be clear that child abuse or neglect, caused deliberately or otherwise cannot be condoned for religious or cultural reasons or tacitly accepted because of the needs and vulnerability of the adult.
- 15.3 It is manager's responsibility to ensure that there is named individuals within each local area who can be contacted by other agencies to share information, where appropriate, and for expert guidance and advice. The TSCB is publishing structure charts listing key individuals on their website to help facilitate this.

Glossary

CAADA	Coordination Action Against Domestic Abuse
CCG	Clinical Commissioning Group
CPA	Care Programme Approach
DAISY	Devon Partnership Trust intranet
DPT	Devon Partnership Trust
NHS	National Health Service
MAPPA	Multi-Agency Public Protection Arrangements
MARAC	Multi-Agency Risk Assessment Conference
MASH	Multi-Agency Safeguarding Hub
PBR	Payment by Results

Useful references

What to do if you're worried a child is being abused (HM Government, 2015)
<https://www.gov.uk/government/publications/what-to-do-if-youre-worried-a-child-is-being-abused--2>

Framework for Assessment of Children in need and their Families (DH, 2000)
<http://webarchive.nationalarchives.gov.uk/20130401151715/https://www.education.gov.uk/publications/standard/publicationDetail/Page1/DH-4014430#downloadableparts>

Working Together to Safeguarding Children (HM Government, 2015)
https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/419595/Working_Together_to_Safeguard_Children.pdf

No Secrets (HM Government, 2000) Link
https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/194272/No_secrets_guidance_on_developing_and_implementing_multi-agency_policies_and_procedures_to_protect_vulnerable_adults_from_abuse.pdf

MARAC guidance (Family Justice Council, 2011)
http://www.caada.org.uk/marac/FJC_MARAC_Guidance_Dec2011.pdf

MAPPA guidance (HM Government, 2012)
https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/281225/mappa-guidance-2012-part1.pdf

What About the Children? (Ofsted, 2013)
<http://www.ofsted.gov.uk/sites/default/files/documents/surveys-and-good-practice/w/What%20about%20the%20children.pdf>

The Golden Rules

<http://www.devonsafeguardingchildren.org/documents/2015/04/tscb-golden-rules.pdf>

Wellbeing and Recovery Coordination (including Care Programme Approach) Policy C05, Devon Partnership NHS Trust (available on DAISY) http://www.devonpartnership.nhs.uk/Publications-Library.24.0.html?no_cache=1&task=show&uid=640&target=1&category=2&Hash=7b4267d021c207a6739a9b3f6f1e804f

TSCB Professional Differences (Escalation) policy

<http://www.devonsafeguardingchildren.org/documents/2014/12/tscb-professional-differences-escalation-policy>

Useful tools

Referral and Assessment flow charts - Adult and Children's - Social Care, Drug and Alcohol, Mental Health