Implications of “Baby P” and safeguarding for the workforce

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Signpost

- Introduction
- Baby P
- General implications
- Implications for early years
- Omissions
- Conclusions

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Baby P – time line

1 March 2006	Baby P born
Nov 2006	Mother's boyfriend moves in; Police/Social services not told
Dec 2006	GP spots bruises on Baby P
	Presented at hospital; head injury/bruising
	In hospital for 4 days
	Mother arrested
	Placed in temporary care with family friend
	Subject to a child protection plan
January 2007	Returned to his mother

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Baby P – Timeline - 2

April 2007	Admitted to hospital; swelling and bruises to his head. Mother claims he fell on marble fireplace. Episode not reported to the police
June 2007	Marks seen on Baby Ps face by social worker; he is sent to hospital; mother re-arrested; family friend paid to live at house for 2 weeks; childminder during day
30 July 2007	Social worker misses bruises; chocolate smeared face
1 Aug 2007	Paediatrician defers development assessment and misses broken back and ribs despite crying in pain
2 Aug 2007	Mother told at SSD office she won't be prosecuted
3 Aug 2007	Baby P dies aged 17 months
11 Nov 2008	2 people convicted; mother pleaded guilty

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Public outrage

- Public outrage immediate and extreme
- Unanticipated by government and professionals
- *Sun* one million petition to Prime Minister calls for sackings, including DCS
- 500 groups created on Facebook, involving 1m+
- 30,000 campaigned with NSPCC on reform of child protection process
- Independent Inquiry by Lord Laming

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Observations

- The Sun and Facebook responses reflected public concern
- Public recognition of professional shortcomings
- Need for a route to do something
- Public engagement was beyond expectations of politicians and professionals
- Need for greater clarity on what we want the public to do

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Implications – general

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Reinstatement of child protection

- *Every Child Matters* agenda, law and guidance is essentially sound BUT

  "While improvements in services for children and families, in general are welcome, it is clear that the need to protect children and young people from significant harm and neglect is ever more challenging. There now needs to be a step change in arrangements to protect children from harm" (Lord Laming)

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“It cannot be beyond our wit to put in place ways of identifying early those children at risk of deliberate harm, and to put in place the means of securing their safety and proper development”

(Lord Laming)

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“Despite considerable progress in interagency working …there remain significant problems in the day to day reality of working across organisational boundaries and cultures, sharing information to protect children and a lack of feedback when professionals raise concerns about a child…Joint working between social workers, youth workers, schools, early years, police and health too often depends on the commitment of individual staff.”

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Proposals to strengthen child protection

- Secretaries of state to set explicit priorities for the protection of children and reflect these in frontline services
- National Safeguarding Delivery Unit to report to Cabinet Sub Committee
- Regular review of referral points
- DSCs without direct experience of safeguarding and child protection to appoint senior manager

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- Revisions to *Working Together* on referrals and assessment
- Frontline staff
- Social worker recruitment and retention
- Health visiting strategy; recruitment; HV's role in child protection of 0-5s to be prioritised
- Share learning
- Resources

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“The DCSF must sufficiently resource children’s services to ensure that early intervention and preventative services have the capacity to respond to all children and families identified as vulnerable or *in need*.”

(Lord Laming)

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The scale of need

- 60,000 children looked after by LAs
- 37,000 children subject of care orders
- 29,000 children with child protection plans
- 200,000 live in household with known domestic violence and violence
- 450,000 with mental health problems
- 250-300,000 children with parents with drug problems
- 55 children killed by parents or someone known to the child

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NSPCC Maltreatment Study: Prevalence of abuse (2000)

- 7% serious physical abuse by parents/carers
- 16% sexual abuse
- 6% serious absence of care at home
- 5% serious absence of supervision
- 6% frequent and severe emotional maltreatment

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SCRs Biennial review 2003-5

(Brandon et al.2007)

- 161 children of which two thirds died
- 47% were less than 1 year old
- Only 12% were on child protection register
- 55% known to children's social care at time of incident – more likely to be in touch with universal or adult services

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Implications for early years workers

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Early Identification

"Schools and early years setting play a key role in early identification, intervention, and support for children at risk of significant harm"

Understand the signs and know what action to take.

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Listening to children

- More approachable and less stigmatising than many other professionals
- A broader and preventive remit
- Early years workers' knowledge and experience of child development
- Relationships with parents and carers
- Role in providing advice
- BUT there is a need to maintain the focus on the child
- Parents/carers can be manipulative.

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Needs of very young children

"They need to be able to notice signs of distress in children of all ages, but particularly very young children who cannot voice concerns and for whom bed wetting, head banging and other signs may be a cry for help."

Lord Laming

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Child protection is everyone's responsibility

- Early years' workers part of the community
- Role in providing advice and support to members of the community
- Will experience the same ambivalence about reporting as the rest of us

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Adults barriers to taking action

- Unsure abuse happening
- Not my responsibility
- Fear of damaging adult relationships
- Fear of personal consequences
- Fear of ruining a life/a family
- What do child protection agencies do?
- Fear of making things worse for the child

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BMRB: Impact of taking action and future action

- 57% of people who took action thought that their action had made things better for the child
- 14% thought their action had made no difference at all
- 25% of action-takers did not know what impact their action had made on the child.
- 1% thought their action had made things worse
- 92% said they would take action in the future

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Care and Health: What would help professionals

- 44% better information as a member of the public
- 21% better opportunities to report as a member of the public
- 18% clearer guidelines on what to do
- 11% lay training on child protection
- 6% more support to take action

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Omissions from Laming Review

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Greater Priority

- Under fives
- Neglect
- Deaf and disabled children
- Cultural issues
- Equal protection

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Finally - conclusions

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We have high expectations of those who work directly with children, young people and their families. We need to match these high expectations with an understanding of the needs and challenges they face, working within their own profession as well as in partnership across the workforce.

Building brighter futures: Next steps for the Children's Workforce, DCSF 2008

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We need to

- Recruit and keep the right people
- Let them know they are valued and supported
- Provide them with access to high quality, flexible and tailored learning opportunities, supervision and time for reflection.

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“NOW! JUST DO IT!”

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