

# Serious Case Review

## Briefing Note (5) for Agencies in relation to Child K



### 1. Introduction

This is the fifth briefing note completed by the NCSCB in response to learning from a multi agency learning review process. The aim of the briefing is to share key learning across the NSSCB partnership to inform frontline practitioners of the issues identified by the review and learning that can be applied to improve practice.

### 2. How this document can be used

- Please read this document carefully and consider the learning in respect of current families you are working with.
- Keep this document in a handy place to support easy reference in future work.
- Take this document to team meetings and share with colleagues.
- Use this document in supervisions for reference and to support case management / reflective practice.

### 3. Case Summary

Child K was 9 weeks old when he died following brain injury. At the time of the incident he was in the care of his father, whom he was staying with overnight. He lived with his mother who had been fully engaged in midwifery and health visiting services, throughout her pregnancy and post child K's birth. Prior to collapse he had been fit and well.

### 4. Findings

The Serious Case Review did not identify any significant concerns in relation to the management of and professional response to this case. Professional practice with Child K and his family was in line with expected procedure. A more curious professional response could have aided the collation of information in relation to the father and the role he was to play in Child K's life and care.

Practitioners need information management systems that support the collation of full family details, including birth parents and partners that live elsewhere; or information about children from previous relationships. Systems should support repeated prompts for any gaps in such information.

### 5. Key Learning

It is critical that Practitioners at all levels who engage with families, either in a clinic setting or within the family home are:

- Aware of the need for good quality information about the family composition and functioning.
- Confident in asking questions about family members, including significant individuals that live elsewhere.
- Capable of professionally exploring any reluctance to share information about family members.
- Revisit any information not obtained on initial enquiry until complete.
- Ensure information in respect of the family and other significant individuals is entered on information management systems.

All practitioners should consider how, where practicably possible, absent parents who care for their children away from the residential address are provided with appropriate information about the care of their infant. This could be by:

- Encouraging them to jointly attend appointments / visits where appropriate
- Supplying additional copies of literature / information leaflets / websites / check lists etc. that are given to the primary carer
- Telephone contact where appropriate
- Information in respect of universal support, guidance, or information forums.

## **6. How to approach requests for information from parents**

Practitioners will be well aware that the success of engagements with parents is often dependent on the context of the meeting and the relationship already established. Below are a few points to consider in your approach:

- Be clear about the information required and why it is required
- Be curious when what seems like basic or routine information is withheld; explore with the parent their reason or anxiety they have about sharing specific information. This way you may be able to alleviate their concerns.
- If the information is critical consider if it can be accessed from another legitimate source.
- Revisit the question when you next see the family, as their position may have changed.

## **7. Building Relationships**

Working hard to build positive initial relationships with families makes it easier later on if difficult issues need to be discussed. Parents/Carers will accept being asked difficult questions if the principles outlined below are implemented and professional relationships will endure. This approach can be applied over a long term involvement with a family or even if you only ever meet them on one occasion.

- Recognising parents' expertise about their own lives and children, doing things with families rather than to them is crucial. Parents need to feel that they are active participants in partnership with practitioners. We know that parents want to remain in control of their family lives and to be listened to.
- Relationships are at the heart of this process. For a parent lacking in confidence and trust to access services, forming a positive relationship with a practitioner can be a bridge to available help and information.
- Empathy: showing an understanding of the challenges a parent is facing in their lives, and being able to see the situation from their point of view.
- Genuineness: being sensitive, honest, non-defensive and trustworthy. Working in the context of an equal relationship and using parents' strengths, views and knowledge alongside your own at every stage of the process.
- Trust is key to success: staff in universal services such as teachers, doctors, health visitors, and practitioners in children's centres can be important sources of support; where families have built strong and sustained personal relationships. This can be crucial in achieving positive outcomes.

## **8. Useful link**

- Multi agency Safeguarding Procedures  
<http://nottinghamshirescb.proceduresonline.com/>