**BSCB Bespoke Suite of Neglect Evaluation Tools Protocol**

1. **Introduction**

Neglect was identified by Blackpool Safeguarding Children Board (BSCB) as a Priority Safeguarding Theme within its 2015-17 Business Plan. The ensuing strategy identifies the need to enable professionals in Blackpool to accurately and consistently identify neglect, thereby ensuring that children and families receive an appropriate level of support in a timely manner.

A shared definition of neglect is provided by Working Together (2015) as being:

“The persistent failure to meet a child’s basic physical and/ or psychological needs, likely to result in the serious impairment of the child’s health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to:

* Provide adequate food, clothing and shelter (including exclusion from home or abandonment)
* Protect a child from physical and emotional harm or danger
* Ensure adequate supervision (including the use of inadequate care-givers)
* Ensure access to appropriate medical care of treatment

It may also include neglect of, or unresponsiveness to, a child’s basic emotional needs.”

1. **Who this Protocol applies to**

BSCB has adopted the Bespoke Suite of Neglect Evaluation Tools as the means by which multi-agency professionals in Blackpool will assess neglect. It is therefore expected that all professionals in Blackpool who have the need to assess whether a child is neglected will use the tools, subject to the licence requirements detailed below.

1. **Principles**

Neglect is a complex issue that requires a consistent and persistent multi-agency response to every child. BSCB has agreed the following principles that apply to all professionals working with children where there are concerns about neglect.

* If you have concerns that a child is being neglected it is your responsibility. Always do something.
* Assess and intervene at the earliest possible opportunity. Aim to enable the family to have the resilience not to need professional intervention.
* Focus your assessments and plans on the lived experiences of the child, while bearing in mind that a whole family approach will be necessary to address the reasons for the neglect.
* Centre interventions on securing improved outcomes for the child.
* Families have the right to expect a consistent approach from professionals throughout Blackpool.
* A shared understanding of neglect is crucial to having a consistent approach.
* Addressing neglect requires a multi-agency collaborative approach.
* The multi-agency approach will be underpinned by information sharing in accordance with agreed single- and multi-agency procedures.
* Interventions are based on good quality assessments that are shared with and understood by the family and other professionals.
* Change is measured and evidenced by repeated use of the same assessments.
* Neglect cannot be addressed in isolation. There will be other needs, for example a child’s health needs or parental alcohol use, which will also need to be met.
* Neglect is typically a long standing issue. Good quality assessments will include historical information.
* All children have the right to be protected from neglect, irrespective of their cultural background, physical or emotional health needs.
* There should be a graduated response to neglect, stepping a child up and down to higher and lower tier services to meet their current needs.
* Neglect may require long term intervention with a family. It is critical to avoid drift and ‘start again syndrome’ when there is a change of involved professionals.

1. **The Bespoke Suite of Neglect Evaluation Tools**

The Bespoke Suite of Neglect Evaluation Tools has been developed by the NSPCC for use in Blackpool in order to enable professionals to provide a comprehensive assessment of the scale, type, impact and reason for the neglect.

The suite of tools comprises:

* Thriving families screening checklist (scale)
* Graded Care Profile 2 (scale, type)
* The Family Pack of Questionnaires and Scales (impact, reason) incorporating:
  + Strengths and Difficulties Questionnaire
  + Parenting Daily Hassle scale
  + Home Conditions scale
  + Adult Wellbeing scale
  + Adolescent Wellbeing scale
  + Recent Life Events questionnaire
  + Family Activity scale
  + Alcohol scale
* World Health Organisation Alcohol Audit (reason)
* Drug Screening tool (reason)
* PTSD checklist (reason)
* Victims Domestic Abuse, Stalking, Harassment and Honour Based Abuse checklist (V-DASH) (reason)

The use of these tools may also be augmented by specialist assessment tools used within a particular profession or discipline e.g. Ages and Stages questionnaire.

1. **Definitions**

The Thriving families screening checklist will provide professionals with an indication as to whether neglect is present or not. Where neglect is identified the Graded Care Profile 2 (GCP2) will then direct professionals to conclude that there is either no evidence of neglect, or evidence of mild, moderate or severe neglect. The following should be read in accordance with the GCP2 Guidance Booklet and “Keeping Children Safe in Blackpool” (the BSCB thresholds document).

**Mild neglect** is evidenced by a failure to provide care in one or two areas of basic needs, although most of the time a good quality of care is provided across most of the domains. This should prompt an Early Help Assessment (if noted already completed) and the assessment as the child as requiring **Early Help**, in the absence of concerns in respect of other forms of abuse that would indicate a higher level of need.

**Moderate neglect** is evidenced by a failure to provide good quality care across quite a number of the areas of the child’s needs some of the time. It can occur when less intrusive measures such as community or single agency interventions have failed, or some moderate harm to the child has or is likely to occur. This would equate to an assessment at **Child in Need**, in the absence of concerns in respect of other forms of abuse that would indicate a higher level of need.

**Severe neglect** is evidenced by a failure to provide good quality care across most of the child’s needs most of the time. It occurs when severe or long-term harm has been or is likely to be done to the child, or the parents/ carers are unwilling or unable to engage in work.This would equate to an assessment at **Child Protection**.

1. **Use of the Bespoke Suite of Neglect Evaluation Tools**

The use of the Bespoke Suite of Neglect Evaluation Tools does not supersede or replace the Early Help Assessment or thresholds document, which remains the overall framework for assessing and providing early help and protection to children in Blackpool.

Having made the assessment of mild, moderate or severe neglect the standard measures to manage a child at Early Help, Child in Need or Child Protection, respectively, should then be implemented. The Bespoke Suite of Neglect Evaluation Tools does not replace the need for the completion of a Early Help Assessment which remains the overall means by which the needs of the child is assessed and to which the completed neglect assessments should be appended.

As a minimum it is expected that all Early Help Assessments, where there is any indication of neglect, will have the Thriving families screening checklist included. This will either provide evidence that neglect is not a significant factor or of the need for further assessment and intervention in respect of neglect. At Early Help and Child in Need levels professionals will then choose which other assessments are most suitable to support their work to assess and intervene to address the neglect that the child is experiencing.

It is therefore expected that any referral for Child Protection services to the Children’s Social Care Duty and Assessment team on the grounds of neglect is supported by a completed screening that evidences severe neglect. (The only exception would be in the case of an emergency referral, although this would be unusual in a case of neglect and probably confined to cases in which neglect was combined with another form of abuse or in which first contact with a child had revealed severe neglect). Should the child progress to Initial Child Protection Conference it is expected that a GCP2 will have been commenced and that this and other neglect assessments will be made available to the conference participants. It is the responsibility of the allocated social worker to make arrangements for the best placed practitioner to complete the GCP2 tool and that of the conference Chair (IRO) to ensure that the assessment is complete, or plans are in place for its completion. Decision making regarding the use of assessment tools, at this stage, will be subject to management oversight, with a view to securing the best quality assessment and outcomes for the child.

In addition to enabling an initial assessment of the scale of neglect, the Bespoke Suite of Neglect Evaluation Tools provides a means by which change can be measured through the repeat and consistent use of the same assessments. The long term and persistent nature of neglect is such that professional involvement with a family may last for a number of years, during which it is expected that assessments will be regularly reviewed. For those children where Child Protection measures are necessary the outcome of assessments will be incorporated in the Child Protection Plan and reviewed accordingly. A fully reviewed GCP2 will be expected to be provided at each Review Child Protection Conference as evidence to support decision making as to whether to continue the Child Protection Plan. Completed assessments may therefore form part of the evidence ultimately provided to a Court to support an application to take a child into care.

1. **Information sharing and consent**

The use of the Bespoke Suite of Neglect Evaluation Tools is subject to the standard [BSCB Information Sharing practices](http://panlancashirescb.proceduresonline.com/chapters/p_info_share_confident.html). Professionals are therefore required to seek parental consent prior to the completion of any of the assessments and delivering Early Help or Child in Need interventions. Other than when the threshold for Child Protection has been reached, information should not be shared with other agencies without parental consent.

In practice, the completion of any of the Bespoke Suite of Neglect Evaluation Tools will be made more accurate and meaningful with the active involvement of parents and older children. This can be extended to encouraging parents to self-evaluate and using assessment as means of goal-setting.

Subject to obtaining parental consent, information should likewise be shared between all involved agencies, in order to ensure the accuracy of assessments and to avoid unnecessary duplication in the completion of assessments. For children assessed as needing Early Help the lead professional, in conjunction with other involved practitioners, should decide which tools should be completed and by whom.

1. **GCP 2 Licence agreement**

The GCP2 tool is owned by the NSPCC and its use is subject to a licence agreement with BSCB. The tool should, therefore only be used by professionals who have attended and passed the two day training course delivered either directly or within a single agency under the auspices of BSCB. Professionals will thereafter be provided with an electronic copy of the tool for their own use, which should not be further distributed. Completed assessments should be stored on the child’s records in the usual manner. To ensure consistency the GCP2 tool should always be completed in accordance with the guidance provided in the handbook. While it is recognised that many professionals who work in Blackpool and attend BSCB training will have responsibility for working with children and families in a wider area than just Blackpool, use of the GCP2 tool is restricted to children resident in Blackpool.

Approved by BSCB Business Management Group 10th July 2017