7 Minute Briefing – Child S, Significant Case Review



Finding

The different communication lines between and within agencies at the point at which babies on the CPR are discharged home from hospital constitute a systems vulnerability for Highland, unless there is shared clarity around who does what and a process for quickly checking whether

they have done.

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The Case

Child S was discharged home at 9 days old. At 30 days old he was referred and admitted to Raigmore Hospital, Inverness following a routine visit from health visiting staff and examination at the GP practice. Injuries were recorded as being consistent with violent head injury and no explanation was offered by Child S's mother.

History Child S's mother and her oldest

children had been known to

services. Children had been on the

child protection register and in

foster care. However, their mother

and her new partner appeared to

begin to co-operate with services.

The children were returned to

their mother's care following the

decision not to proceed to a

Hearing

Finding

There is a difference in professional understanding of what constitutes a wellevidenced argument for statutory measures in neglect cases that is risking an impasse between SCRA and referrers, potentially placing children at greater risk of significant harm.

Finding

Given the geographical spread of population to be served in Highland, senior managers need assurance that the culture of practice in the areas is healthy and effective and that they will be alerted to any concerns in a timely way.

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There is a tendency for professionals to "label" how a parent presents too prematurely - in this case disguised compliance - too frequently and without thorough assessment, which is impacting directly on the quality of analytic thinking in case work.

Finding

Finding

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Family Teams have a pivotal role to play in a multi-agency response to safeguarding vulnerable children and families. The consistent availability of experienced, qualified staff is essential along with the accountability for caseloads and supervision provided by appropriate practitioners, with the required skills and experience.

Learning from Case Review

- Reflect on the appraisal of practice and recommendations and discuss implications for your service and practice.
- Using the table provided, please record any actions arising from this review for your team/service/agency.



SCR Child S - Learning and Actions

Identify the learning or recommendations that are relevant to your team/agency and summarise your discussion on those points. Please return this form as directed in the email which was sent to you.

Name of Organisation:		Manager:	
Service/Team:		Contact Details:	
Date completed:			
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What actions have been agreed to improve practice?

What needs to happen?	Who will do it?	By when?	How will you know when it has been done?	How will you know if it has worked?