

# Local Child Safeguarding Practice Review: Learning Briefing for Young Person A – April 2022

## Reason for the Child Safeguarding Practice Review (CSPR)

- In May 2020 at aged 15 Young Person A tried to take their own life by hanging themselves.
- Members of the public intervened and following some time spent in hospital Young Person A made a full physical recovery.
- At the time of writing this briefing in April 2022 Young Person A is being supported in the
  care of the local authority. They've developed skills to help understand their mental distress
  and seek support where needed. Young Person A feels more settled, happy and relaxed
  and is looking forward to a career in animal care.

#### **Background**

Young Person A lived with their mother and father during the early part of their childhood. Throughout this time, there were worries about the care of Young Person A in relation to neglect and domestic abuse. Young Person A's mother struggled with drug and alcohol use and both physical and emotional health.

Young Person A's parents separated and following a period of child protection planning they went to live with their father. Whilst still a small child, Young Person A's mother was diagnosed with a life limiting disease. This is really significant for Young Person A as they could inherit the condition.

In 2012 Young Person A engaged with CAMHS following a referral from school because of a self-harm incident. In 2013, when aged 9, Young Person A disclosed they had been seriously sexually assaulted by a family friend who was later jailed for the offence. During 2012 – 2020, Young Person A needed treatment and support for eight further episodes of self-harm. Each episode saw an increase in severity and treatment needed with family tension high and father struggling to cope. The period of 2018- 2020 saw a particular escalation in self-harm for Young Person A alongside them exploring their gender identity.

## **Summary of Learning**

- Young Person A's voice and lived experience was not at the forefront of agency assessments and interventions. Their experience of adverse childhood experiences didn't influence decisions made.
- Agencies had partial knowledge and information about Young Person A's history and needs. Many agencies were offering support but information could have been shared more effectively, especially in times of crisis.
- A multi-agency approach was required much earlier with agencies needing to focus on the needs of Young Person A and their family and how these could be met.



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- Young Person A benefited from having trusted, consistent and prolonged relationships with their youth worker and education staff. This helped them manage their emotional wellbeing. However, the inconsistent approach across agencies did not facilitate the ability for a core group of workers to be able to build these trusted relationships alongside Young Person A or fully utilise the trusted relationships in place to effect change.
- The use of family trees (genograms), support network maps (ecomaps) and chronologies would have supported a better understanding of Young Person A's lived experience and helped agencies have a better understanding and response to father declining Children's Social Care support. This could have also helped consideration of the most appropriate type of support/plan as concerns about parenting emerged.
- During Covid, agencies adapted and support continued at a high level for example via video therapy. Young Person shared they felt the lack of social contact during Covid was difficult.

#### Recommendations

- Agencies to review their policies and procedures to ensure the child's voice and lived experience is central to the work undertaken. This should be clearly recorded. PSCP should outline how the voices of children do and will influence the work of the Partnership.
- All agencies should consider how chronologies are used in their work.
- The PSCP needs assurance that practitioners understand adverse childhood experiences and trauma informed practice.
- Multi-agency risk assessments and the support that follows should include all relevant professionals and specialisms, such as mental health and exploration of gender identity.
- Children's records should have a genogram (family tree) and ecomap (support network) on their records.
- PSCP to review the processes, procedures and strategic commitment to support children and young people with significant self-harm presentation. Any identified gaps should be addressed.
- Education settings should be clear on the pathways available for young people presenting
  with this level of complex need and review at what point they should seek additional
  guidance to ensure they are offering the appropriate support and if necessary ensuring the
  right multi-disciplinary approach to meeting the young person's needs.

To read the full report for Young Person A Click Here