

Safeguarding GP Lead Forum

21st June 2017 - Sunshine House

Child V- brief summary

Child V is a baby who was subject of a child in need pre-birth plan as both parents were disabled, being partially sighted and completely blind due to retinopathy, father also had mild learning difficulties. He was admitted to hospital incidentally, when the mother was admitted for mastitis in January 2016. Non-accidental injuries were observed when the mother was sent to A&E. Care proceedings were commenced and following an unsuccessful mother and baby assessment he was made subject of a care order with a plan for adoption.

Case has undergone a multi-agency concise review as a possible 'near miss'.

Key Positives:

- Continuity of midwife through the whole pregnancy
- Support from Children's Centre worker
- Good relationship with Visual Impairment worker
- Multiple professionals involved
- Mother was compliant with medical treatment

Key Difficulties

- Delay in single assessment
- Lack of assessment models for visually impaired parents and parents with learning difficulties.
- Parental non-compliance/dishonesty
- Lack of SMART planning – lots of meetings but less co-ordination
- Poor information sharing with GP

Learning from this case for primary care

- Child V's EMIS notes did not make reference to parents' vulnerabilities, though clear to all staff in practice

Overall recommendations

- The child's GP must always be consulted and involved in planning for a Child in Need
- The SSCB document 'Joint services protocol to meet the needs of children and unborn children whose parents have disabilities 2016' to be reviewed and disseminated
- CiN planning and review should always include an assessment of risk to the child and contingency planning in case of this risk escalating
- This review has identified a lack of local support and advocacy networks for blind parents. Adult services are to explore future sources of support and advocacy