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**Agency Child Protection Conference Report with Chronology**

**Initial Child Protection Conference/**Please delete as appropriate

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| **Date of Conference** | 10.05.2024 |

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| **Name & Address of Agency** | 0-19 Norfolk Healthy Child Programme,Unit 3Cringleford Business CentreIntwood Road, Norwich. NR4 6AU |
| **Name of worker writing report** | Jayne Smith  |
| **Secure email address** | J.Smith@nhs.net |
| **Job title/role** | Family Public Health nurse  |
| **Team Manager Name** | Joanne Brown  |
| **Team Manager Email address** | Joann.Brown1@nhs.net |
| **Date report written** | 29.04.2024 |

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| **Are you planning to attend the Child Protection Conference** | Yes  |
| **Name and email address of representative attending if not yourself** | N/A |

**Family Details**

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| **Child(ren)’s Name** | **Date of Birth** | **Address** |
| Pheobe Pink  | 10.7.2010 | 5 Long Field RoadNorfolkNR9 100 |
| Ellie Pink  | 31.01.2024 | As above  |

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| **Parents’/Carers’ names** | **Date of Birth** | **Address** |
| Chloe Pink  | 09.09.1989 | As above  |
| Chris Pink  | 05.07.1987 | As above  |

**In order to ensure that the child(ren) and their family are fully supported to actively participate in the Child Protection Conference, it is important that the following points are addressed –**

* All sections of the report are completed in full using language the family will understand.
* Report focuses on the **impact** on the child(ren) and what they or their presentation has told us.

**This report is to be shared and discussed by your agency with the Child(ren)/Young People (in an age-appropriate way) and all Parents/Carers and a copy of the report is sent to the Child Protection Chair - The timescales for this are at least 2 working days prior to an Initial Conference and 3 working days prior to a Review conference.**

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| **Chronology – the child(ren)’s lived experience \***Please refer to chronology guidance notes before completing  |
| **Date period of chronology: 22/12/2022 to 29/04/2024** Health information should also be considered from the child/ children’s GP, local hospital including A&E and any other Health care provider i.e NCHC, NSFT . The information below is from the Norfolk Healthy Child Programme (HCP) only and does not reflect all health input or the amount of missed appointments that have occurred. |
| **Date / time of event:** | **Source of Information:**Where information originated from e.g. a worker (inc. name & title), the child, parent, friend, or relative**[Mandatory completion]** | **Significant event** **Brief** description of event. Language **must** be clear and concise | **Impact for child:****RED** = safeguarding event and/or cumulative negative, harmful events/outcome. **AMBER** = significant life events. **GREEN** = positive events / outcomes**RAG rating only – no narrative**  | **Action taken/Actual** **outcome**: Very short statement of action. E.G. Increased home visits / S47 Strategy Meeting & ICPC held / Parent responded immediately, took child to A&E*Narrative* ***must*** *be in the child’s agency record or clinical notes* | **Overall impact for child:****RED** = confirmed negative, harmful outcomes.**AMBER** = some continuing risk OR improving/positive outcome, further change needed**GREEN** = confirmed positive outcomes – parenting strengths utilised, child experiences safe care |
| **2020** | System 1 health records – Healthy Child Programme | The family received a high level of support in 2020 from HCP, social care, GP and mental health services due to dad’s significant mental health issues which impacted negatively on the family and in particular on Pheobe’s mental health and school attendance.  | **Red** | Case closed due to family engaging with professionals and positive outcomes achieved.  | **Green** |
| **22/12/2022** | School  | Referral from Phoebes school to school nurse (5-19) Health Child Service (HCP) and Mental Health Support Teams (MHST).  | **Red** | School nurse to contact Pheobe and parents to offer Health Needs Assessment | **Red** |
| **15/01/2023** | System 1 health records – Healthy Child Programme | Health Needs Assessment completed with Pheobe. Weight review completed  | **Green** | School nurse to refer to assistant practitioner to support Pheobe after school with healthy eating. Pheobe to engage with MHST. | **Amber** |
| **30/01/2023** | System 1 health records – Healthy Child Programme | Joint visit at home after school with assistant practitioner and school nurse.  | **Green** | Assistant practitioner to support Pheobe at home after school to discuss healthy eating.  | **Amber** |
| **10/02/2023****20/02/2023****03/03/2023** | System 1 health records – Healthy Child Programme | 3 visits completed at home with Pheobe and assistant practitioner.  | **Green**  | Pheobe to complete sessions with MHST worker in school. .  | **Amber** |
| **14/04/2023****28/04/2023****15/05/2023** | System 1 health records – Healthy Child Programme | Pheobe has attended 5 out of 6 sessions at school with the MHST support worker.  | **Green**  | Work package completed with MHST.  | **Green** |
| **09/10/2023** | Midwife  | Antenatal notification from Midwifery services. Cause for concern raised by community midwife.  | **Amber**  | Joint visit with HV and Community midwife | **Green** |
| **30/10/2023** | System 1 health records – Healthy Child Programme | Joint visit with Health visitor and community midwife.  | **Green**  | HV to complete face to face P2P sessions at home.  | **Green**  |
| **15/11/2023****30/11/2023****20/12/2023** | System 1 health records – Healthy Child Programme | 3 out of 4 Face to face P2P sessions completed at home with parents.  | **Green**  | HV to complete new birth visit.Dad to attend his GP appointment. | **Amber**  |
| Click or tap to enter a date. | **ELLIE**  |  | Choose an item. |  | Choose an item. |
| **31/01/2024** | System 1 health records – Healthy Child Programme | New birth notification received by HCP. Ellie was born at prematurely and remains in NICU  | **Amber** | Health visitor to complete new birth visit on NICU / discharge.  | **Green** |
| **02/02/2024** | NICU  | HCP informed by NICU that Ellie will be discharged home next week. | **Amber** | Health visitor to arrange a joint visit with Neonatal Outreach Team  | **Green** |
| **12/02/2024** | Neonatal Outreach Team | Joint home visit completed with Health visitor and Neonatal Outreach Team.Family agreed to a referral to ECFS.  | **Amber** | HV to refer to ECFS and Joint visit to be arranged with HV and ECFS support worker  | **Amber** |
| **20/02/2024** | System 1 health records – Healthy Child Programme | Joint visit to family with Health visitor & Early childhood and Family Service(ECFS)  | **Green** | ECFS worker to support family. HV to offer support with care of Ellie | **Amber** |
| **01/03/2024** | Neonatal Outreach Team | Ellie has been discharged from Neonatal Outreach service (see their report / information)  | **Green** | HV to arrange a home visit | **Green** |
| **10/03/2024** | System 1 health records – Healthy Child Programme | Home visit completed by Health visitor for New Birth contact. Parents consented to Norfolk Graded Care Profile (NGCP) | **Amber** | HV to complete joint visit with ECFS support worker ECFS worker to support family | **Amber** |
| **16/03/2024** | System 1 health records – Healthy Child Programme | Joint visit with HV and ECFS to complete NGCP.  | **Amber** | ECFS worker to arrange support visits to family.  | **Amber** |
| **20/04/2024** | HCP Healthy Child Programme | Joint visit with Health visitor and ECFS worker to assess progress. Universal Plus offer from HCP and JON contact details shared with family.  | **Green** | Family on universal plus pathway. Next planned contact from HCP - targeted 3-4 month review.  | **Green** |
| **29/04/2024** | Mental health services and Norfolk police  | HCP were informed by mental health services and Norfolk police that there has been a significant mental health incident involving dad.  | **Red**  | HCP to attend ICPC and share HCP information | **Red**  |
| **What does this lived experience mean for the child(ren)?** (Analysis Summary)  |
| * What is working well for the child that reduces the risks and increases the child’s safety and resilience? Identify family strengths and safe behaviours (Include strengths within the wider family network which increase safety).

Ellie is making steady progress with her growth and development. Grandmother has been a positive source of support in the past and this would need further exploration around the level and type of support grandmother is willing to offer as well as other members of the family’s network. Ellis has a good bond with her mother and older sister Pheobe. Pheobe has positive aspirations for herself and she is striving to achieve her dream of being a fire fighter. Pheobe found support from her grandmother helpful in planning and cooking healthy meals. This has positively contributed to Pheobe’s BMI reducing, this has had a positive impact on Pheobe’s self-confidence and self-esteem. Pheobe has also engaged well with MHST and Assistant practitioner to make some positive changes to her lifestyle. These positive changes could have long lasting impact on Pheobe’s physical and emotional health and wellbeing. Pheobe will need continued and consistent support from her parents, wider family and appropriate professionals to maintain the positive changes she has made. * What are you worried about in the child(ren)’s life that may lead to / results in risk and harm for them? (Confirm if long term issue or recent event)

During contact with Health visitor at home Ellie presented as a quiet baby and mainly looked to her mum and Pheobe during contact. Ellie was observed by Health visitor to physically turn away from her dad when he spoke to her. During home visits Ellies was observed to wear a thin top and leggings, she had no socks on, these clothes were not appropriate for the weather conditions as the outside temperature was 4 degrees. Ellies bedding in her crib was not clean, some stains were visible on the bedding and the sheet was too big for the crib making it unsafe for Ellie. This is not in line with the advise from the Lullaby trust in regards to safe sleeping for babies. Due to concerns regarding poorly fitting clothes observed by the Health visitor during home contacts the family may need ongoing support form family network. Ellie is vulnerable due to her age and she requires her family to maintain and ensure her emotional, physical health and safety at all times.Home conditions were also of concern, the home was seen cluttered with old furniture which posed a safety hazard in the home, 3 full refuge bags were seen by Health visitor outside the front door with dirty nappies. The kitchen work tops were observed by the Health visitor full of take away food containers, dirty crockery and no space for the safe and hygienic preparation of formula feeds which potentially could have a detrimental impact on Ellies health. Family finances were of concern as this impacted on parents ability to provide healthy meals for the family, the family for a time did not have a washing machine. Pheobe missed out on school for over a week due to not having a clean uniform. This had a negative impact on Pheobe and her affect during a home visit was at times flat and her motivation was greatly reduced. I am very worried that Pheobe and Ellies dad’s mental health will have a harmful and detrimental effect on Pheobe’s and Ellies health and wellbeing in the short term and long term. I am worried that Pheobe may use maladaptive coping strategies to deal with challenges within the home and to regulate her emotional states. There is also the potential for Ellie to be negatively impacted by these negative environmental factors. Ellie has been harmed by her father and was hospitalised because of her father’s significant mental health episode. This incident is evolving and any potential effects of this are unknown.Whilst Pheobe can articulate her wishes and feelings to trusted adults in her life, Ellie is a very young and a non-verbal baby who is unable to articulate her needs. This makes Ellie very vulnerable to abuse, neglect or harm directed at her from her father. Ellie relies completely on her parents and wider family to keep her safe from all harm and to ensure that she can grow and develop in a safe environment. * What do you believe will be the likely outcome for the child(ren) if their current situation continues?

If the current situation continues the potential short and or long term negative impact for Pheobe and Ellie is potentially very harmful and could have a long-lasting impact on them. I am worried that there will be another significant incident involving their father because of his poor mental health.  |

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| **Child(ren)’s views on their situation and on the report.**(Please ensure you have the child(ren)’s permission to share their views with parents/carers and with conference members). |
| What has the child shared with you they are worried about?During initial contact with this service, Pheobe shared that she wants to achieve and maintain a healthy weight, diet and lifestyle. Pheobe shared that she wants to be a fire fighter and have a really good level of fitness for this. Pheobe also shared that she and her parents find if really hard to maintain positive changes without consistent support form the wider family support network or professionals.What do they say has been working well?Pheobe shared that she found the intervention from the assistant practitioner and MHST support worker helpful, Pheobe has made good progress with her weight reduction and exercise routine. This has had a positive impact on Pheobe’s mental health and well-being. Ellie is too young to voice her wishes however a baby of Ellies age and stage of development would want to have consistent, sensitive and positive parenting so that she can continue to grow and develop and reach her fullest potential in life. What do they say they would like to happen?Pheobe wants to be safe at home when her dad is in the home. Pheobe wants support to maintain the positive changes that she has made and Pheobe wants to continue to prioritise a healthy weight, diet and lifestyle so that she can reach her goal of becoming a fire fighter. Ellie would want her parents and extended family to support her need to thrive, be safe and to socialise with her peer group so that she can develop her social, physical, intellectual, and emotional skills for the future thus enabling her to fully participate in the world around her.  |
| Date report shared with child (10+) | 08.05.2024 |
| **Parents’/carers’ views** |
| Views on the support you have provided and whether they think this has helped their child.Mum reported to this service that the advice and guidance has been really useful however both parents struggle to maintain changes once services are no longer involved. Parent’s/carer’s view of the information contained within this report.Mum report’s that her views have been fairly and comprehensively reflected in this report, mum also acknowledge that the family need ongoing support to make positive changes for their children and to maintain these changes. I have been unable to ascertain dads wishes due to his current mental health difficulties.  |
| Date report shared with parents/carers | 08.05.2024 |

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| **Proposed recommendation (Please refer to email provided regarding threshold and/or NSCP website for guidance):**Please consider for each child/young person whether the threshold for a Child Protection Plan is met and why.**Scaling question****On a scale of 0 to 10 where 10 is that the child is safe and their needs are being met, and 0 is that this child is at risk of significant ongoing harm and/or their needs are not met, how would you rate the current situation?** |
| **Name of child/ren** | **Scale** | **CP** | **Category**  | **CIN**  | **NFA** |
| Pheobe Pink  | 2 | yes | Neglect  |  |  |
| Ellie Pink  | 1 | yes | Neglect  |  |  |
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| **Reasons**There has been a relatively short time since the family have accepted support from various agencies to the significant event involving dad’s mental health incident. Due to Ellie being harmed during this incident, I have serious concerns for her safety as well as Pheobe’s safety unless dad’s mental health is stabilised and the risk of harm is significantly reduced.  |

**Signature:** Jayne Smith

**Date:** 08.05.2024

**Print Name:** Jayne Smith

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| **Please send the completed form to the Independent Reviewing Service -** Send by email: **cs.bsupport.bowthorpe@norfolk.gov.uk** **Please remember to send a copy of the report, including the Chronology, to the Chair of the conference least 2 working days prior to an Initial Conference and 3 working days prior to a Review Conference.** |