7-Minute Briefing



01 Background

Locally across Leicester, Leicestershire & Rutland (LLR), we continue to see neglect cases, some of which have warranted a review of the case. The LLR Neglect Toolkit was originally launched in July 2016 and was updated and re-launched in 2021 to include adolescent neglect. This briefing will help practitioners to identify useful resources and approaches to respond to neglect in its various forms.

07 Reviewing Practice / Reflective Questions

Have you witnessed or been informed by the wider network of any key indicators?

Have any of your previous judgements become fixed? Have you employed critical thinking and challenge? Are you prepared to challenge the fixed views of others?

Have you triangulated information? Have you listened to the views of other practitioners, the wider family and those who know the child well?

Have you considered signposting adults who need support to relevant services? If they may be eligible for statutory health or care services, have you made a referral to those agencies? If the adult has their own safeguarding issues due to their vulnerability, have you considered contact with Adult Social Care?

06 Key Practice Points

- Where there are reported concerns about a child appearing thin, hungry, and seeking food, any agency should proactively advise that the child is weighed (whether this is by a GP, Health Visitor or School Nurse) and the results should be entered on the child's centile chart.
- Practitioners must employ professional curiosity and consider parental motivation, capacity to change, parental disengagement, avoidant behaviour or any disguised compliance.
- There should not be an overreliance on professional observations of the home or the child's outward appearance. A clean and tidy home does not automatically mean there is no neglect. There should also not be an overreliance on the parent's/carer's self-reporting. There is a need for authoritative practice to respond to/engage parents so the child can be seen, and their needs assessed, including, if required, for a health assessment within Child Protection processes.



02 Definition of neglect (Working Together 2018)

"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: a.) provide adequate food, clothing and shelter (including exclusion from home or abandonment); b.) protect a child from physical and emotional harm or danger; c.) ensure adequate supervision (including the use of inadequate caregivers); d.) ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs."

Neglect often co-exists with other forms of abuse, as seen with the recent national cases of Arthur Labinjo-Hughes and Star Hobson.

03 Persistence of Neglect

Neglect is usually – but not always – something that is persistent, cumulative and occurs over time. It can continue without a critical event, or incidents may be widely spaced, but its effects are corrosive to children's/young peoples' development. Neglect can also occur as a one-off event e.g., where there is a family crisis, or a parent is under the influence of drink/drugs. It is possible that one-off incidents are part of a wider background of the neglect of the child, thus any incident-based reports need to be assessed to identify whether there are patterns, however widely spaced.

05 Key Practice Points

- Neglect's presentation as a "chronic condition" requires the collation and analysis of sometimes small and seemingly insignificant events that only when viewed together provide evidence that neglect is of concern.
- Keeping a focus on the child/young person has to be a priority.
- If parents/carers have complex and multiple needs, they need support to address these so that they can parent their children effectively. Professionals may feel empathy for them and develop a tolerance for actions/inactions which are detrimental to the child. This type of a parent-centred approach invokes a risk that the focus on the child/young person, the actual or potential harm they experience and the impact on their development becomes marginalized and they are seen as the problem to be fixed. Articulated negative attitudes should be gently challenged and recorded as spoken by another.

04 Neglect Toolkit

The LLR Neglect Toolkit gives the practitioner a mechanism to capture the here and now as well as the development of neglect over time. It highlights the importance of taking a child developmental approach to neglect and thinking about the implications for the child's/young person's age and stage of development. The linked scoresheet for home use allows practitioners to break down their analysis, considering key areas such as physical care, health, safety and supervision, love and care, stimulation, and education.