

# Essex Safeguarding Children Board

## Learning Review Children KK

### Summary of Learning

#### Background

Three siblings, referred to as Children KK, discovered their mother and her partner deceased in their home. Mother and her partner had sadly died following a drug related overdose. Mother's alcohol, substance misuse and mental ill health was long-standing. There was a history of multi-agency involvement; the children have multiple learning needs and were subjected to neglect over many years.

#### Key Learning Points

##### **Parental Substance Misuse & Mental Health**

- Maternal substance misuse was long-standing but under-assessed due to reliance on self-reporting
- Mental health issues were inconsistently addressed; children witnessed self-harm and emotional instability
- Services lacked integration and specialist input in decision-making

##### **Cumulative Neglect & Emotional Harm**

- Neglect was chronic and cyclical, with short-lived improvements

##### **Escalation & Challenge**

- Professional concerns were raised but often not acted upon
- Escalation procedures existed but were seen as combative and ineffective
- A culture of healthy, reflective dialogue was lacking

#### Guiding Principles – Underpinning the Multi Agency response to Neglect

Safeguarding children from neglect is complex, it requires multi-agency leadership and a system wide approach

The voice of schools require greater emphasis and weight when safeguarding children from neglect.

Patterns of cumulative neglect require closer attention, a system of oversight to be established for cases where there are repeated requests for support to the Essex County Council's Children & Families Hub and for children who are the subject of Child In Need or Team Around the Family where neglect is a feature in the life of a child.

Multi-agency chronologies are a critical tool in identifying cumulative neglect.

All services involved with a child and family including housing services, adult mental health services and drugs and alcohol services should be invited to contribute to child protection, child in need and Team Around the Family processes – at minimum this should involve a consultation with these services to inform decisions and plans.

When concerned about the drug and or alcohol use of a parent or child, wherever possible, practitioners should make direct referrals to the Drugs and Alcohol Service and follow up

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#### Changes and Progress in practice following this review

- Establishment of an Essex Safeguarding Children Board Neglect Subcommittee
- Developing a multi-agency risk assessment framework and whole systems approach to neglect
- Development of flagging and information mapping methods within and across multi-agency systems that improve opportunities to recognise cumulative neglect and impact
- Consider the means to provide an opportunity for professionals to come together and hold reflective discussions where significant multi-agency practice dilemmas present
- Development of a repeat request for support protocol by the Children's Social Care Children & Families Hub

#### Further Reading and Resources

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| <input type="checkbox"/> <a href="#"><u>NSPCC – Brain Builder Video</u></a>                    | <input type="checkbox"/> <a href="#"><u>Effective Support – Essex</u></a> |
| <input type="checkbox"/> <a href="#"><u>Voice of the Child</u></a>                             | <input type="checkbox"/> <a href="#"><u>Neglect</u></a>                   |
| <input type="checkbox"/> <a href="#"><u>Drug and Alcohol use – Training October 2025</u></a>   | <input type="checkbox"/> <a href="#"><u>Whole Family Approach</u></a>     |
| <input type="checkbox"/> <a href="#"><u>Early Help Drop In sessions</u></a>                    | <input type="checkbox"/> <a href="#"><u>Parental Substance misuse</u></a> |
| <input type="checkbox"/> <a href="#"><u>NSPCC - Parents with substance misuse problems</u></a> |                                                                           |