1. What happened

A Rapid Review took place for a 1-month-old baby when she was admitted to hospital with significant injuries. The baby's father claimed the injuries were accidental but the Pediatrician felt the explanation was not consistent with the injuries sustained. Following a second medical opinion being sought, which was considered as good practice, it was determined that the baby most likely suffered an accidental injury.

There was a history of domestic abuse between the child's parents with numerous reports having been made to Police.

2. Assessing risk

5 Domestic Abuse, Stalking, Harassment assessment outcomes were recorded as medium risk in 6 months. Consideration should be given to previous incidents and incidents not deal with in isolation. The accumulation of frequent medium risk Domestic Abuse, Stalking, Harassment assessments could indicate an increasing risk overall and consideration may need to be given to whether or not the case is in fact high risk, which would then trigger a referral to the Multi-Agency Risk Assessment Conference.

children

No agency involved with the family had recorded any conversations or outcome about where the other two siblings were on the night of the incident and if they were being appropriately supervised/safeguarded.

8. Take away messages

- Consider the accumulation of risk and don't treat incidents in isolation
- Share information to safeguard the child/ren \geq
- Consider the best approach to take to gaining consent



7. Routine domestic abuse enquiry

During the Rapid Review agencies recognised that it would be better to record what is actually asked with regards to routine domestic abuse enquiry rather than just the fact that the enquiry took place. This will assist with triangulating information and help identify any inconsistencies in reporting of domestic abuse incidents.

6. Gaining consent

No consent was sought from mother by the Harm Assessment Unit for a referral to Targeted Early Help and so the case was triaged and closed. This was a missed opportunity to gain consent and provide support for the family.

Practitioners need to consider:

- the importance of gaining consent for referrals to early help services
- how to seek consent in a way that motivates and empowers the person to consent to a service that is deemed to meet their needs

4. Information sharing

STAR Housing were not aware of the safeguarding concerns for the children and were not aware that the baby had been born. They were also not informed of father's bail conditions. Had they have been aware then they could have reported a breach of bail conditions to the Police at the time. STAR Housing reported that they could have then visited the property once a week if there were on-going concerns.

5. Gaps in information gathering

The family were registered with three different GPs. This information was not shared by the Integrated Care System with the SSCP Business Unit in scoping the Rapid Review. This meant that not all relevant information on the family could be gathered and raised the question of how GPs share safeguarding concerns with other GPs when family members are registered elsewhere?

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3. Consideration of safeguarding other