

Logan's* early history was of his mother not managing to care for him and he was looked after from age two temporarily by the local authority before moving to his father's care. Over time he and his siblings were the subject of low-level concerns to various agencies for bumps and bruises, non-school attendance, and poor home conditions. The children moved between the mother's and father's care but as short-term improvements in the children's circumstances were not sustained, the family situation was discussed at the Early Help Hub meeting and attempts made to engage them. However, the family did not want to engage.

As more concerns were raised (health appointments not being kept, Logan soiling at school, and additional presentations at A&E where poor supervision had led to various accidents and incidents), a Child in Need (CiN) plan was put in place. This seemed to be effective at engaging the family and achieving positive change.

The family's case was closed after nine months on a CiN plan but six months later a Child Protection (CP) investigation resulted in a CP plan being put in place.

The CP plan addressed the unmet health needs of the children – immunisations and appointments, engagement with education setting, support with educational attainment, improved home conditions, and appropriate supervision.

Following the birth of Logan's youngest sibling, the mother became seriously ill, necessitating hospital admission. The children were placed with suitable carers and were attending school well, while extended family supported the mother and maintained contact.

The children's father gave up work and focussed on the CP plan. He ensured the children attended their health appointments and their immunisations were updated. He developed much better relationships with professionals and supported the family support worker to arrange a family meeting. This increased the support network for the family and enlightened grandparents who were previously unaware of the concerns held by agencies.

The school started to support the family more proactively, providing homework books and colouring pens. The father started to engage better with professionals, and this continued once the mother's health improved. The improved communication enabled the social worker to challenge the mother about her previous disguised compliance.

Due to progress on the CP plan, a CiN plan was put in place once again, and after three months, stepped down again to the Early Help Hub. Work took place to support the bond between the mother and the younger children and psychological support was also made available to the mother.

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The social worker introduced the intensive family worker (under the Supporting Families Project) to the family, and the father was helped to seek and maintain a part-time job. The mother's health needs continue but the family are now supported by wider family and friends. The children receive support in school and their attendance has improved, as well as their attainment and behaviour.

**Pseudonym*