



**OXFORDSHIRE  
COUNTY COUNCIL**



**Oxford Health**  
NHS Foundation Trust

# JOINT ACTIVITY PATHWAY CHILDREN AND ADULT SERVICES

## **1. Background**

- This pathway was developed as a result of a local serious case carried out by Oxfordshire Safeguarding Children's Board, following the death of Child M, aged 5 in 2017. Child M's mother had a long history of mental illness which included long periods when she appeared well and did not show symptoms. Child M's mother was found to have been suffering from a serious mental disorder when she killed her son.
- In early 2015 (while living in another local authority area) Child M's mother became mentally ill, telling professionals that she had thoughts about harming Child M which were understood to be part of her psychotic thinking.
- Child M spent a period in foster care and his mother accepted hospital treatment. The family moved to Oxfordshire in mid-2015, Child M's mother's mental health remained good, she was in contact with mental health services and her GP and she worked closely with her health visitor, children's centre, pre-school and primary school.
- There were no serious concerns about Child M who was in good health, reached all of his expected developmental milestones and was always observed to be calm and happy, interacting very positively with his mother.

### **1.1 Key findings**

- There was no coordinated transfer with agreed objectives and plan, each agency made its own transfer arrangement resulting in a lack of shared understanding of the history.
- Practitioners working with the family in Oxfordshire had limited or no knowledge of the mother's mental health history and were not aware of the episode where she had thoughts of causing him harm.
- When the family moved to Oxfordshire, case transfer and closure summaries did not contain the full details of the incidents that had placed Child M at most risk.
- Important transfer information was added to the electronic record as a document with a file name that did not indicate its significance
- Extended family members had important background information that could have added to the assessments undertaken

### **1.2 Themes in common with other Oxfordshire case reviews**

- Parental mental ill health – the impact of the parent's mental health on the safety and wellbeing of the child.
- Loss of continuity of service (and significance of past history) when families move across boundaries.
- Professional curiosity – the need for curiosity about the family's past history, relationships and current circumstances that moves beyond reliance on self-reported information.
- 'Think Family' – the importance of thinking about the role of extended family members in the family system.

### **1.3 Learning points for practitioners and the safeguarding system**

- **Assessment**

A detailed assessment should be undertaken that includes parent and family history, strengths/protective factors and potential risks.

- **Use of language**

Mental Health practitioners should be clear in stating mental health diagnosis and presentation and possible impact on parental capacity, behaviour and ability to keep their child/ren safe

- **Information sharing**

Remember GDPR are not barriers to sharing information about the welfare of children in need, including those who move in and out of the local authority area

### **1.4 Recommendations from the Serious Case Review**

- **Joint Assessments**

To achieve a better shared understanding of parental mental ill health on children and mutual appreciation of roles and responsibilities, practitioners from adult mental health, children's social care and others working with children should consider undertaking joint assessments.

- **Case history**

Member agencies should set their staff clear expectations for obtaining and reading case histories and giving them due weight in assessment.

### **1.5 Work undertaken**

A working group was established made up of Oxford Health NHS Foundation Trust (OHFT) adult mental health colleagues, safeguarding team, community children services and Childrens social Care (CSC).

The team created a flow diagram linked to the threshold of needs matrix and an aide memoire to achieve the recommendations as set out in the serious case review and support practitioners when completing assessments either within their own agency, joint assessment between adult and children services or to support practice.

A workshop took place in January 2021 with CSC and children's community and mental health colleagues to review the pathway, suggest amendments, and consider any barriers. Following discussion and findings from Brandon et al (2020) that of 278 case reviews, 164 (59%) involved domestic abuse, 153 (55%) involved parental mental health problems and 99 (36%) are faced with problematic parental substance use. It was felt the flow chart could be useful for staff working with parents with other additional needs, not just mental health. Hence the change of title of the pathway for any parents with additional needs.

Information to write this document has been taken from various sources and the reference list is at Appendix 2.

## **2. Joint Activity Pathway**

This flowchart, threshold/continuum of needs levels and aide memoire is for any practitioner who works with parents/carers with additional needs. These and links to further information at appendix 1 are designed to support you in this work

### **2.1 The flowchart**

Parents with additional needs have the right to be provided with care and support that can enable them to meet the needs of the child/children. Children have the right to be protected from harm and to receive services when their health or development is at risk.

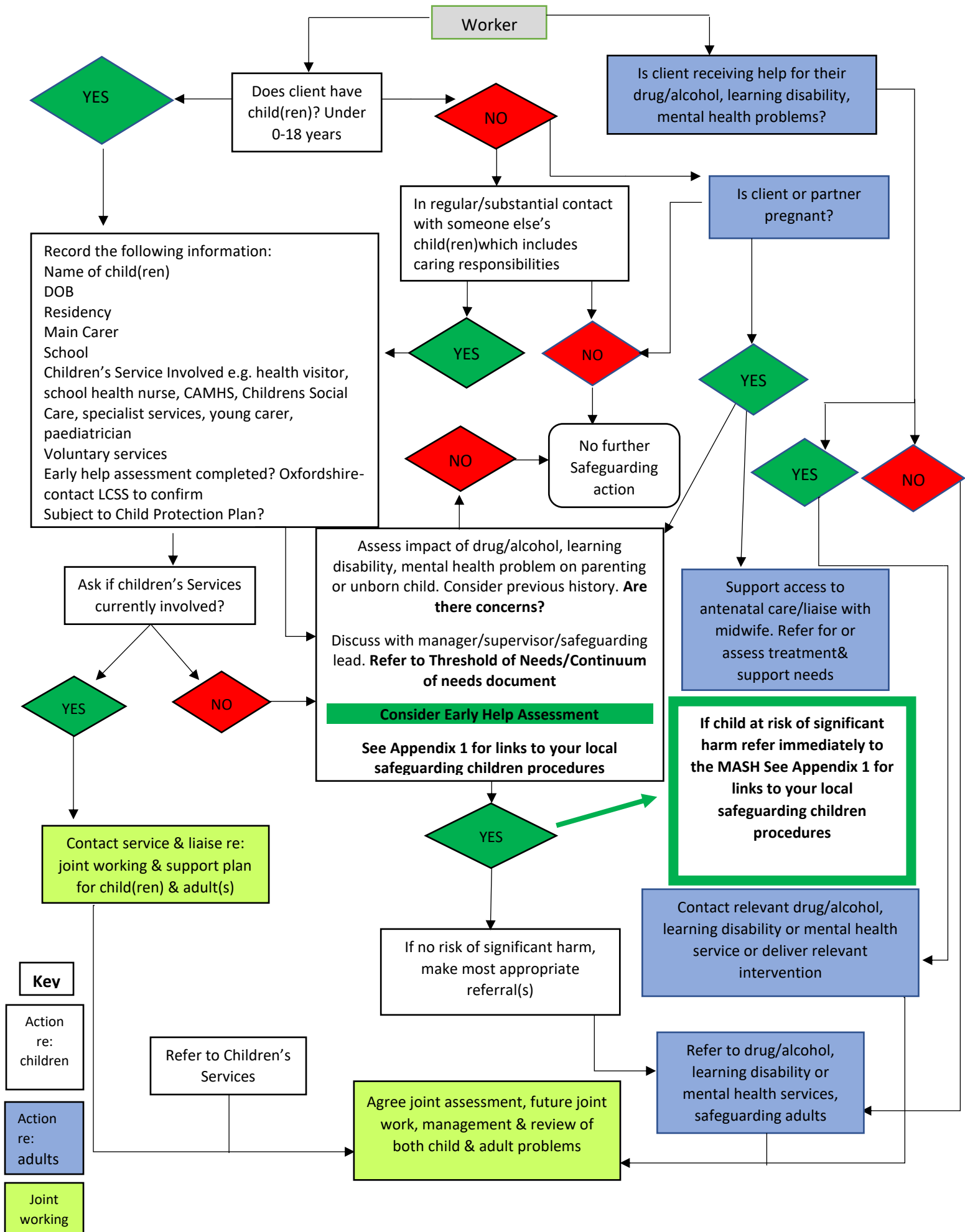
Informed assessments and effective multi-agency/disciplinary working are the key to ensuring that children and families receive the appropriate services to meet their identified needs and manage risk.

The flow chart on page 4 takes you through a potential journey of a child/parent/or significant other (who may have substantial contact with children involving caring responsibilities) from identification that a parental/carer issue may have impact on capacity to provide care for the child/ren, to how and when contact/liaison should be made with other agencies/services. The flowchart includes joint working and support planning for child(ren) and adult(s) and adult referrals to drug/alcohol, learning disability, mental health services or safeguarding adults. It also promotes good recording of information regarding the child and family.

### **2.2 Threshold of needs**

The threshold of needs document on page 5 <https://www.oscb.org.uk/documents/threshold-of-needs-2021/> looks in detail at a child's developmental needs, parents' capacity to be able to meet these needs and how family and environmental factors might affect this. The document provides criteria, level and type of need and level of help to be provided if child has needs at universal, additional complex, or critical level.

**Flow chart for safeguarding children, young people, and unborn babies whose parents/carers have additional needs that may affect parent capacity**



# Threshold/Continuum of Needs Levels

## Universal Services (Level 1)

Children and young people, including those who are disabled/seriously ill and young carers, who reach their full potential, make good overall progress through the care of their families, communities and the support of a range of universally provided services e.g. schools, primary health care, leisure services, and some specialist disability services such as health care and education.

Response: Agencies should identify what they can do first to support the child and their family through their own service.

Assessment: Agencies use own assessment process to tailor services provided.

## Additional Needs/Services (Level 2)

Children and young people, including those who are disabled/seriously ill and young carers, who may become vulnerable and who will require additional support due to their own development, family circumstances or environmental factors. They are at risk of not reaching their full potential and life chances may be impaired without additional services. This can be a single or multi-agency response.

Response: where family's needs are more complex and require multiagency response, agencies need to work together to provide a co-ordinated service to a child and their family who need support from more than one agency.

Assessment: Oxfordshire- Complete Early help assessment. Support is available through Locality and Community support services Bucks- Complete an early help assessment or share outcomes from your agency assessments if more than one agency is involved.

## Complex Needs/Comprehensive Support (Level 3)

Children and young people, including those who are disabled/seriously ill and young carers, whose needs are complex and who require support from more than one agency. They are at risk of social or educational exclusion; their health, welfare, social or educational development is being impaired; and life chances will be impaired without the provision of additional services.

Response: Oxfordshire - Ring (if not an immediate safeguarding concern) Locality & Community Support Service (LCSS) Bucks – Contact First Response (aka MASH) using multi-agency referral form (MARF). See appendix 1 for links to local safeguarding procedures.

Assessment: Early help assessment, child in need (statutory assessment led by children's social care, under section 17 of the Children's Act 1989) or agencies may use their own assessments in the first instance.

## Critical Needs/Statutory Specialist Support (Level 4)

Children and young people, including those who are disabled/seriously ill and young carers, who have critical and enduring needs. They are at risk of significant harm or removal from home. If a child is in immediate danger or is at risk of significant harm, a referral should be made to children's social care and/or the police immediately.

Response: Oxfordshire – Complete on-line referral form and if urgent also RING Multi Agency Safeguarding Hub (MASH) - Tel: 0345 050 7666; Bucks- Contact First Response by completing the multi-agency referral form (MARF) or ring 0845 4600 001; Police call 999. See appendix 1 for links to local safeguarding procedures.

Assessment: Statutory assessment will be led by children's social care under the Children's Act (1989)

## 2.3 Prompts for considering parenting capacity

Parents with additional needs have the right to be provided with care and support that can enable them to meet the needs of the child/children. Children have the right to be protected from harm and to receive services when their health or development is at risk.

Informed assessments and effective multi-agency/disciplinary working are the key to ensuring that children and families receive the appropriate services to meet their identified needs and manage risk.

Key to ensure children are safe, protected, and their needs are being met where parents have additional needs, is to assess parent's capacity to ascertain if additional support is required, particularly in relation to the following areas;

- Basic care
- Ensure they are safe
- Able to provide emotional warmth
- Stimulation
- Appropriate boundaries and stability

The following prompts are taken from the Oxfordshire and Buckinghamshire Threshold/Continuum of Needs document<sup>1</sup> however, other local area threshold documents include similar information.

The prompts are there to help you consider whether the child/children's needs are being met by parents/carers. If this raises concerns, further discussion with multi-agency/disciplinary colleagues or a referral will be required as indicated by the joint activity pathway and threshold/continuum of needs levels above.

### 2.3.1 Key questions

**Are parents/carers able to provide the following:**

#### **BASIC CARE**

- How are the children being cared for?
- Are they receiving basic care?
- Providing for the child's physical needs, and appropriate medical and dental care. Includes provision of food, drink, warmth, shelter, clean and appropriate clothing, and adequate personal hygiene.

#### **ENSURING SAFETY**

- How are the children kept safe?
- There should be recognition of hazards and danger both in the home, online and elsewhere.
- Is safety planning for the children included in the mental health care plan if a parent's mental health deteriorates.

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<sup>1</sup> Oxfordshire Safeguarding Children Board (2021) *Oxfordshire's Threshold of Needs* Oxfordshire Safeguarding Children Board, Oxfordshire; Buckinghamshire Safeguarding Children Partnership (2021) *Continuum of Need* Buckinghamshire Safeguarding Children Partnership, Buckinghamshire.

## **EMOTIONAL WARMTH**

- Ensuring the child's emotional needs are met, giving the child a sense of being specially valued, and a positive sense of own racial and cultural identity.
- Includes ensuring the child's requirements are met for secure, stable, and affectionate relationships with significant adults.
- There should be appropriate physical contact and comfort and affection sufficient to demonstrate warm regard, praise, and encouragement.

## **STIMULATION**

- Promoting child's learning and intellectual development through encouragement and cognitive stimulation and promoting social opportunities.
- Ensuring school attendance or equivalent opportunity.
- Facilitating the child to meet the challenges of life.

## **GUIDANCE & BOUNDARIES**

- Enabling the child to regulate their own emotions and behaviour through demonstrating and modelling appropriate behaviour, control of emotions and interactions with others.
- Guidance which involves setting boundaries, so the child develops an internal model of moral values, conscience, and appropriate social behaviour.

## **STABILITY**

- Providing a sufficiently stable family environment to enable a child to develop and maintain a secure attachment to the primary caregiver/s, to ensure optimal development.
- Parental responses change and develop according to child's developmental progress.
- In addition, ensuring children keep in contact with important family members and significant others.

### **2.4 Aide memoire for adult and children services to support joint working**

This is an aide memoire to prompt practitioners when completing an assessment within their own agency, a joint assessment between adult and children services or to support practice.

#### **2.4.1 Consider the child/children's experience**

Here are some messages to mental health professionals written by young people from a Barnardo's project in Liverpool<sup>2</sup>. The messages show how important it is to keep children informed.

- Introduce yourself. Tell us who you are and what your job is.**
- Give us as much information as you can.**
- Tell us what is wrong with our parents.**
- Tell us what is going to happen next.**
- Talk to us and listen to us. Remember it is not hard to speak to us; we are not aliens.**
- Ask us what we know and what we think. We live with our parents; we know how they have been behaving.**
- Tell us it is not our fault. We can feel really guilty if our mum or dad is ill. We need to know we are not to blame.**

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<sup>2</sup> Barnados Action with Young Carers (2007) *Keeping the Family in Mind Resource pack 2<sup>nd</sup> Edition*. Barnardo's. Liverpool.



- ❑ Please don't ignore us. Remember we are part of the family and we live there too.
- ❑ Keep on talking to us and keep us informed. We need to know what is happening.
- ❑ Tell us if there is anyone we can talk to. **MAYBE IT COULD BE YOU.**

**2.4.2 As part of the assessment completed within your agency (e.g. risk assessment, care plan, early help assessment, assessment framework) consider the following:**

- Complete a genogram to understand the family and relationships. Click on the link if you are unsure how to complete a genogram <https://www.oscb.org.uk/wp-content/uploads/2019/08/genogram-detail.pdf>
- Consider completion of a multiagency chronology, if appropriate to your service and it has been identified as required as part of the assessment.
- Whether there are any actual or potential risks to the children, including delusional beliefs involving them, and drawing on as many sources of information as possible, including compliance with treatment.
- Inviting key professionals to Care Programme approach (CPA) meetings for adults who are a parent/carer. Health visitors should be invited where children are under 5 years.
- Offer age-appropriate information to help children understand and cope with their parent's mental illness.
- Provide the opportunity for children to be involved in planning support for themselves and for their parents.
- Work with schools and other children's agencies so that, if necessary, social, emotional and practical support can be given.
- With whom are the children able to talk to?
- Consider transition points and ensure that the network is updated regarding change of staff or service. The responsibility of handing over this information would fall to someone such as the team manager.

## Appendix 1

### Links to Local Safeguarding Childrens Board/Partnership for safeguarding procedures

Bath and North East Somerset- [Safeguarding children | BCSSP \(bathnes.gov.uk\)](https://www.bathnes.gov.uk/safeguarding-children)

Berkshire West- [Berkshire West Safeguarding Children Partnership - scp](https://www.berkshire.gov.uk/safeguarding-children)

Pan Berkshire- [Pan Berkshire Local Safeguarding Children Board Child Protection Procedures Manual \(proceduresonline.com\)](https://www.proceduresonline.com/pan-berkshire-local-safeguarding-children-board-child-protection-procedures-manual)

Buckinghamshire- [Home - Buckinghamshire Safeguarding Children Partnership \(buckssafeguarding.org.uk\)](https://www.buckssafeguarding.org.uk/)

Hertfordshire- [Hertfordshire Safeguarding Children Partnership | Hertfordshire County Council](https://www.hertfordshire.gov.uk/safeguarding-children)

Milton Keynes- [Safeguarding Children - Milton Keynes Council \(milton-keynes.gov.uk\)](https://www.milton-keynes.gov.uk/safeguarding-children)

Northamptonshire- [Home - Northamptonshire Safeguarding Children Board \(northamptonshirescb.org.uk\)](http://northamptonshirescb.org.uk)

Oxfordshire- [Home - Oxfordshire Safeguarding Children Board \(oscb.org.uk\)](http://oscb.org.uk)

Swindon- [Reporting Concerns \(proceduresonline.com\)](http://proceduresonline.com)

Wiltshire- [Wiltshire Safeguarding Vulnerable People Partnership \(wiltshirescb.org.uk\)](http://wiltshirescb.org.uk)

### **Links to Adult Local Safeguarding Adults Board/Partnership for safeguarding procedures**

Bath and North East Somerset- [Safeguarding adults | BCSSP \(bathnes.gov.uk\)](http://bathnes.gov.uk)

Berkshire- [Home Of Berkshire Safe Guarding For Adults \(berkshiresafeguardingadults.co.uk\)](http://berkshiresafeguardingadults.co.uk)

Buckinghamshire- [Home - Buckinghamshire Safeguarding Adults Board \(buckssafeguarding.org.uk\)](http://buckssafeguarding.org.uk)

Hertfordshire- [Hertfordshire Safeguarding Adults Board | Hertfordshire County Council](http://hertfordshire.gov.uk)

Milton Keynes- [Safeguarding Partnership Policies & Procedures; Milton Keynes Safeguarding Partnership \(mktogether.co.uk\)](http://mktogether.co.uk)

Northamptonshire- [Safeguarding adults - Adult social services \(northamptonshire.gov.uk\)](http://northamptonshire.gov.uk)

Oxford- [Home - Oxford Safeguarding Adults Board \(osab.co.uk\)](http://osab.co.uk)

Swindon- [Adult Safeguarding - Swindon Safeguarding Partnership](http://swindon.gov.uk)

Wiltshire- [Wiltshire Safeguarding Adults Board \(wiltshiresab.org.uk\)](http://wiltshiresab.org.uk)

## **Appendix 2**

### **Supporting documents**

Barnados Action with Young Carers (2007) *Keeping the Family in Mind Resource pack 2<sup>nd</sup> Edition*. Barnardo's. Liverpool.

Bolton Safeguarding Children Board (2014) *Joint Protocol Working with Parents/Carers Who Have Mental Health Problems*. Bolton Safeguarding Children Board. Bolton.

Brandon, M, et al. (2020) *Complexity and challenge: a triennial analysis of SCRs 2014-2017 Final report*. Department of Education. London.

Buckinghamshire Safeguarding Children Partnership (2021) *Continuum of Need* Buckinghamshire Safeguarding Children Partnership. Buckinghamshire.

Buckinghamshire Safeguarding Children Partnership (2021) *Parenting Capacity and Mental Illness: Guidance* <https://bscb.procedures.org.uk/lkqoq/parents-who-have-additional-needs/parenting-capacity-and-mental-illness-guidance#s1148>

Evans, J and Fowler, R. (2008) *Family Minded: Supporting children in families affected by mental illness* (U.K.). Barnados. Liverpool.

Hampshire Safeguarding Adults Board; Hampshire Safeguarding Children Partnership; Isle of Wight Safeguarding Adult Board, et al. (2017) *Joint Working Protocol, Safeguarding Children and Young People whose parents/carers have problems with: mental health, substance misuse, learning disability, and emotional or psychological distress*. Hampshire Safeguarding Adults Board et al. Hampshire.

OFSTED (March 2013) *What about the children? Joint working between adult and children's services when parents or carers have mental ill health and/or drug and alcohol problems*. Crown. London.

Oxfordshire Safeguarding Children Board (2019) *Oxfordshire's Threshold of Needs* Oxfordshire Safeguarding Children Board. Oxfordshire.

Oxfordshire Safeguarding Children Board (2020) *Children of Parents with Mental Health Problems* [https://oxfordshirescb.proceduresonline.com/p\\_ch\\_par\\_mental\\_health.html](https://oxfordshirescb.proceduresonline.com/p_ch_par_mental_health.html)

Royal College of Psychiatrists (Jan 2011) *Parents as patients: supporting the needs of parents who are patients and their children*. Royal College of Psychiatrists. London.

Social Care Institute of Excellence (SCIE) (2011) *Think child, think parent, think family: a guide to parental mental health and child welfare*. SCIE. London.

Social Care Institute of Excellence (SCIE) (May 2012) *At a glance 9: Think child, think parent, think family*. SCIE. London.