### 1. Background

A 16 month old child was placed under police protection after receiving a call from a friend of the child's mother who said there was a child with injuries in a property that he had been staying at.

The mother and her friend were both arrested. The child was taken to hospital.

## 2. Extensive Injuries

The injuries sustained by the child were extensive and included:

- Bite marks
- Bruising
- Pinch marks

A full body map was completed

## 3. Young Adults in a Child's Life

The child's mum, dad and mum's friend all had a history of complex childhood trauma.

Consideration of the impact of this on their ability to care for a child was not fully explored and understood, leaving a child at risk.

### 8. Fathers' Rights

The child's dad had concerns about what was happening to his child when they were with mum. He didn't know he could keep the toddler with him if he thought he wasn't safe.

Dad's don't know they have equal rights as a parent. Service delivery and the media exacerbate this.



#### 4. Unseen Men

Dad was involved in the child's care however no checks were done on his home environment and there was no evidence that he was spoken to regarding his input.

Dad's GP did not know he was going to be a father, had they known they would have reached out to him to offer support.

### 7. ACES - Impacts on Parenting

All three young adults were sexually abused or exploited in their childhood, in addition to other traumatic events.

An assessment of any additional support or the offer of Targeted <u>Early Help</u> would have demonstrated an understanding of the complexity of their collective trauma.

# 6. Coding on Health Systems

Some agencies did not have the correct coding on their system for the young adult who was a care leaver. This meant that they did not have the understanding of the complex nature of their background.

GP practices have to manually input Care Leaver status.

### 5. Assessment of Risk

All three adults were known to agencies that held information about sources of risk to the child. Each spoke to practitioners and shared could have highlighted a potential concern.

Practitioners need to think about assessing risk for young adults with children, including historic risks.



