

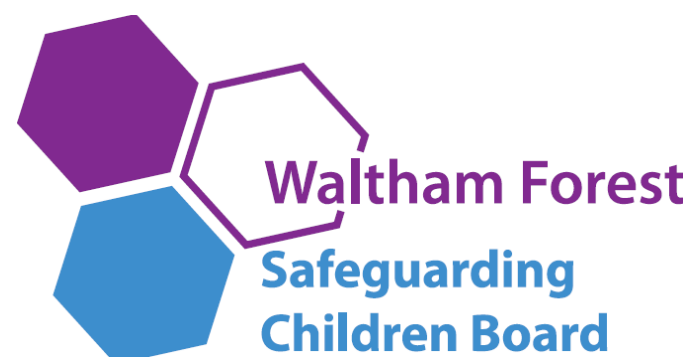


Strategic Partnership Boards

SAFETY SAFEGUARDING WELLBEING

Waltham Forest Safeguarding Partnership Learning from practice – child neglect

13 May 2025



Child neglect | Background and context

Strategic Partnerships (SP)

Responsible for the coordination of:

- 4 statutory partnerships in WF (Safeguarding Children Partnership, Safeguarding Adults Board, Community Safety Partnership and Health & Wellbeing Board)
- Statutory reviews (local child safeguarding practice review {LCSPR}, safeguarding adults review {SAR} and domestic abuse related death reviews {DARDR} formerly DHRs) - responsibility for identifying and disseminating learning. [Current published reviews can be found here](#)

Impactful learning

SP - currently on an improvement journey to make sure that all our learning leads to demonstrable change – echoed in [Child Safeguarding Practice Review \(CSPR\) Panel annual report 2023 – 24](#)



Child neglect | Perplexing presentations

One of the headline findings in recent LCSPR Children L relates to 'perplexing presentations'

What is your understanding of perplexing presentations?

Share an example of an indicator



The [London Safeguarding Children Procedures](#) describe that 'the presence of alerting signs where the actual state of the child's physical/mental health is not yet clear but there is no perceived risk of immediate serious harm to the child's physical health or life may be evidence of a 'Perplexing Presentation''

Some examples of perplexing presentation indicators (alongside each other) include:

- Discrepancies between reported signs and symptoms versus how the child presents
- Requests for appointments but then child not being brought
- Unexplained health conditions reported by parent(s)
- Potential fabricated or induced illness
- Many different services involved (particularly health)
- Absence from school



Child neglect | Children L

- White British - large sibling group who lived with their mum and dad
- While loved and cherished, the quality of care by their parents did not meet their day-to-day needs
- For all children - feeding issues, constipation, incontinence, mobility issues, speech and language delay, poor social development skills
- Parental concerns regarding additional learning needs
- Many different professionals / services involved
- Parents' needs not fully understood nor supported by the professional network
- Extensive health examinations, medical diagnoses, specialist services
- Not aligned with the parents' reports of the children's symptoms
- Inconsistencies in bringing children to appointments and low nursery/school attendance contributed to a pattern of 'perplexing presentations'
- Drift and delay in working out the perplexing presentations
- Cumulative harms for a long time in their early years, despite statutory interventions
- The children now thriving - they live together in a foster home and maintain regular contact with their parents



Child neglect | What have we learned from Children L?

THINK ABOUT THE CHILD'S WORLD in all meetings + identify who has the best connection with child/family. How are you hearing the voice of the child? And making sure that the parent(s) voices don't overshadow?

ESCALATION PROCESSES

We need to improve how we resolve professional disagreements.

For perplexing presentations, there is a need to escalate to a consultant paediatrician or psychiatrist (depending on the presentation) where there remains concern.

RECORDING

- In cases of neglect it is of particular importance that observations are properly recorded. This includes the child's interactions and parts of the home, both seen and not seen
- Consider using chronologies and genograms. These are helpful tools that support practice, especially in complex circumstances
- Simplify medical terminology into plain language or ask if you don't know what something is!



Child neglect | What have we learned from Children L?

RELATIONAL PRACTICE

- The most powerful tool to facilitate change.
- A balance of trust, empathy, partnership, and appropriate authority can be reparative and effect timely change for children

SUPERVISION

- Where high support and high challenge flourishes
- Good quality reflective supervision plays such an important role in assisting with making judgements and decisions as a practitioner and when working together

PROFESSIONAL CURIOSITY

- Essential for perplexing presentations, alongside tenacity / persistence
- Trust your gut – if something doesn't seem right, ask yourself and others why!

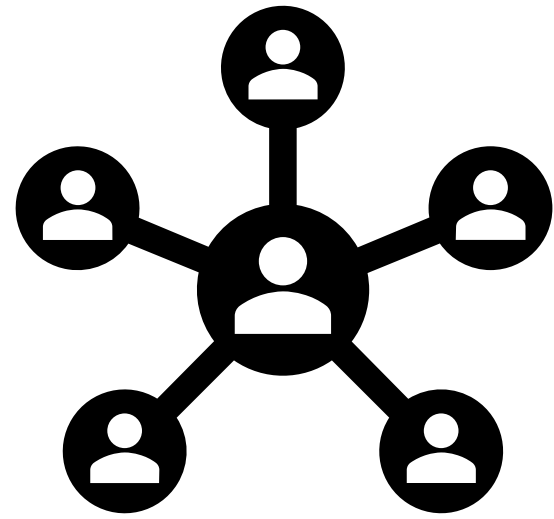


Child neglect | What is the Partnership doing about it?

- Developing a quality of care toolkit
- Refreshing the escalation processes
- Strengthening safeguarding pathways
- Targeted learning sessions – we'll be coming back to ask you what's different



Child neglect | Our ask of you



- How will you share this learning?
- Look out for the Quality of Care (Neglect) toolkit



Child neglect | Resources

- LCSPR Children L
 - [Full report](#)
 - [7 minute briefing](#)
 - [Partnership response](#)
- [RCGP toolkit for perplexing presentations](#)
- [Perplexing Presentations \(PP\) / Fabricated or Induced Illness \(FII\) in Children RCPCH guidance](#)
- [Child Safeguarding Practice Review \(CSPR\) Panel annual report 2023 – 24](#)
- NSPCC briefing on neglect - <https://learning.nspcc.org.uk/media/hukmdrp2/statistics-briefing-neglect-august-2024.pdf>
- [London Safeguarding Children Procedures](#)
- [Waltham Forest escalation process](#)
- [Strategic Partnership Boards](#)
- [Resources to Improve Practice webpage](#)
- [How to escalate professional concerns about a child](#) – to note that this is the process of being

