

## Safeguarding Briefing – safeguarding infants under one year of age

### 1. National context:

**Non-accidental injuries** - Amanda Spielman, Ofsted Chief Inspector, presented at the National Children and Adult Services (NCAS) Conference earlier this month. In her address, she highlighted the concerning rise in serious notifications made to Ofsted during the pandemic. Between April and October 2020, there were over 300 serious incident notifications. A significant proportion of these – almost 40% – were about babies, over a fifth more than in the same period as last year. And tragically, over half of these cases (64 children) suffered non-accidental injuries. Sadly, 8 children died as a result.

Ms Spielman reported *“Violence towards babies was already a worry before COVID. Over a quarter of all incidents reported to the Child Safeguarding Practice Review Panel last year involved non-accidental injuries to babies. Children being abused, often by young parents, or other family or household members, who had very little social support.”*

The same issues were highlighted in a recent letter from Vicky Ford MP (Parliamentary Under-Secretary of State for Children and Families) to Directors of Children’s Services.

**Sudden Unexpected Death in Infancy (SUDI)** – Ms Spielman also referenced concerns regarding unexpected infant deaths: *“As well as babies being intentionally harmed, we’re seeing a high number of unexpected infant deaths. Some, apparently preventable tragedies: babies not being put down to sleep safely, sharing a bed or sofa with a parent who has been drinking, for example.”*

A report from the national Child Safeguarding Practice Review Panel in July 2020 described how almost all the cases of SUDI in the period covered by the report (June 2018 – August 2019) were cases where there were pre-existing wider safeguarding concerns such as cumulative neglect, domestic violence, parental mental health concerns and substance misuse.

### 2. Local context:

Here in North Yorkshire and York we have seen a reflection of this national picture, with an unprecedented number of cases of injuries to young infants and a number of unexpected child deaths where wider concerns were present.

### 3. What can we do?

Clearly these are complex situations made even more challenging by the restrictions imposed by the pandemic – and there are no easy answers. However, there are a few things that all of us working with children and families can do in conjunction with our safeguarding partners.

**Reviewing cases and offering additional support** – in her correspondence with Directors, Vicky Ford MP asked that practitioners “*review the circumstances of families who have historically caused significant concern, have recently turned a corner, but have had a new baby, in the last 6 months.*” This recognises the impact that new babies can have on family dynamics, particularly in so-called ‘pressure cooker’ families and where access to extended family and friend support is limited by Covid. Additional welfare calls, offers of support and sign-posting to other services for these families can all help to avert potential crises.

**Remember ICON: Babies Cry, You Can Cope** – this has now been in place in North Yorkshire and York for the past twelve months and is a public health initiative helping parents understand normal infant crying and how to deal with it. All new parents are routinely given the ICON message ante-natally, following delivery and in the post-natal period. However, practitioners can make every contact count by reinforcing the message and talking to parents about managing infant crying.

**Safe sleeping advice** – where practitioners are working with families where there are identified vulnerabilities, the message about safe sleeping needs to be strongly promoted as part of “*wider initiatives around infant safety, health and wellbeing.*” Work is already underway with colleagues in Children’s Social Care and the Independent Reviewing Officers to raise awareness of this issue and ensure that it is addressed as part of any safety plan, but health practitioners are ideally placed to present and reinforce the message about safe sleeping particularly where those wider safeguarding concerns are known.

*‘And as ever, we cannot overstate the importance of curiosity here. It may not always be comfortable territory. But the right questions protect children. All professionals who work with a family where there is a new baby have a role to play. Consider how well parents are coping, and if there’s any help that they might need.’* (Speilman, 2020)

### **Further information:**

Link to transcript of Amanda Spielman speech:

<https://www.gov.uk/government/speeches/amanda-spielman-at-ncasc-2020>

Child Safeguarding Review Panel (2020) ‘Out of routine: A review of sudden unexpected death in infancy (SUD ) in families where the children are considered at risk of significant harm’ Available at:

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/901091/DfE\\_Death\\_in\\_infancy\\_review.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/901091/DfE_Death_in_infancy_review.pdf)

ICON: <https://iconcope.org/> for further information and resources.