



Learning Lessons Review Briefing Parental Mental Health and Safeguarding

Parental Mental Health and Safeguarding

Living in a household where parents or carers have mental health problems does not necessarily mean a child will experience abuse or negative consequences. Many children whose parents have mental health problems go on to achieve their full potential in life, particularly if their parents receive the right support at the right time.

However, there is a risk that parental mental health problems can impact negatively on children. All types of mental health problems can vary in severity. The impact on children depends on the parent or carer, their circumstances and the support they receive.

Babies of mothers who experience perinatal mental illness are at an increased risk of being born prematurely with a low birth weight. Post-natal depression can affect parents and carers bonding with the baby and can have a negative impact on the baby's intellectual, emotional, social and psychological development.

In older children the impact of parental mental health problems include a risk of developing behavioural problems, being required to take on a caring role and increased stress and anxiety. In the most serious cases children may suffer abuse or neglect from a parent or carer with a mental health problem and parental mental health problems are frequently present in cases of abuse and neglect. The risks to children are greater when parental mental health problems exist alongside domestic abuse and parental substance misuse.

For further information and guidance see [NSPCC Parental Mental Health](#)



The Background of the Review

Darlington Safeguarding Partnership undertook a review in 2022 to understand and develop learning from three child safeguarding cases, two came in as learning request referrals to the Learning and Development Group, the third case was highlighted through a multi-agency audit undertaken by the Children's MASH Operational Group. Whilst none met the criteria for a Child Safeguarding Practice Review, it was evident that there was learning to explore.

In all three cases, parental mental health was a significant factor and there appeared to be no recognition of the impact or risk this had on the children in the family home. The reviews highlighted the absence of a 'whole family approach' including consideration of wider family issues. Agencies appeared instead to focus on the concern of the moment and did not always consider the daily lived experience of the children. Whilst agencies received information, there was a lack of information sharing and there was not a holistic response.

The Review and Findings

A number of meetings were held in order to clarify facts and understand current processes and decision making in practice, through those meetings the following areas of learning were identified:

- An absence of the 'whole family' approach, including considering extended wider family issues, agencies appeared instead to focus on the concern of the moment.
- There was no recognition of the impact or risk mother's mental health was having on the safety of the children or action taken in respect of this.
- Whilst agencies received information, there was a lack of information sharing and holistic response and poor record keeping.
- There were many missed opportunities to make referrals to Children's Services or Early Help services and poor information sharing across all agencies.
- Practitioners failed to follow their organisation's child protection procedures and did not seek safeguarding advice from Designated Safeguarding Leads within their own organisations.
- Failure to notify partner agencies when services were withdrawing.
- Emergency Department did not make a safeguarding referral despite numerous attendances, nor did it trigger any alarms.
- No triangulation of information sharing with GPs when parents are involved with mental health services.
- Missed opportunities in signposting to support agencies.
- Lack of professional curiosity and lack of professional challenge - in one case some reliance/belief that mother could keep child safe and in another dad was identified as the protective factor, however this was never fully explored
- Poor understanding of roles within and across organisations
- Need to understand cultural background and beliefs and how this may impact on family dynamics.



What have we Learned?

- A 'whole family' assessment which covers the impact of family dynamics and vulnerabilities is good practice as is a referral to Children's Social Care.
- Agencies need to fully understand the nature and seriousness of an individual's mental health and think more broadly about the risks in the family home and the needs of the child, not just the concern of the moment.
- Practitioners should demonstrate professional curiosity and consider who else is in the family home and what support they may also need—missed opportunities to build relationships and to hear the voice of the child.
- Consider the development of a pathway to notify schools when parents are in mental health crisis to enable support to be put in place, similar to that provided under Operation Encompass.
- Frequent attenders policy within the Emergency Department (ED) to be implemented for adults as well as children.

What are we going to do as a result of this review?

- Ensure training and awareness captures a 'whole family approach' to enable practitioners across child and adult services being confident in coordinating services to support and fit the whole family needs.
- Development of an Organisation Directory of key safeguarding contacts which will support practitioners in understanding who to contact within agencies. Click [here](#) to view directory.
- Agencies to pull together their key action points on the learning identified for all three cases for the Learning and Development Group to determine if any further wider multi-agency learning is required.
- Hold a focussed session to explore cultural issues in relation to safeguarding children.
- Agencies to undertake quality assurance processes to evidence practice has changed and provision of assurance reports to QAPM.

What are the signs to look out for?

Poor parental mental health can have a detrimental effect on the health and development of children and young people. Many parents with mental health problems are able to manage their condition and minimise its impact on their children, but sometimes it does affect their ability to cope with family life.

If parents experience mental health problems in pregnancy or the first year of a baby's life, this can affect the way they are able to bond with and care for their child and is important that practitioners are able to recognise if a new parent or carer is struggling with their mental health and help them access appropriate support.

Some signs and indicators to look out for in older children:

- tiredness
- Worried about what is happening at home
- Poor/dirty clothing, school attendance
- Showing signs of distress
- Poor emotional responses to stressful situations
- Isolation, poor relationships, being bullied



WHOLE FAMILY
APPROACH

What does good look like?

- Consider a whole family approach - try to understand who is living in the family home and what support they may also need—be curious.
- Listen to the child/young person—what is life like for them, what are their fears, worries or wishes
- Understand what other things/issues may be present within the family home—family dynamics.
- Understand cultural background and beliefs when working with families where English is not first language.
- Discuss the concerns with your manager or other practitioners.
- When working with an adult, consider sharing information with Children's Social Care, Education or other agencies at earliest opportunity to enable appropriate support to be offered.

Want to learn more?

Useful Resources and information

A comprehensive range of information, policy, procedure, practice guidance and training opportunities are available to support you and can be accessed via the [DSP website](#). Additional information can be obtained from:

[NSPCC Website](#)

[Royal College of Psychiatrists website](#)

