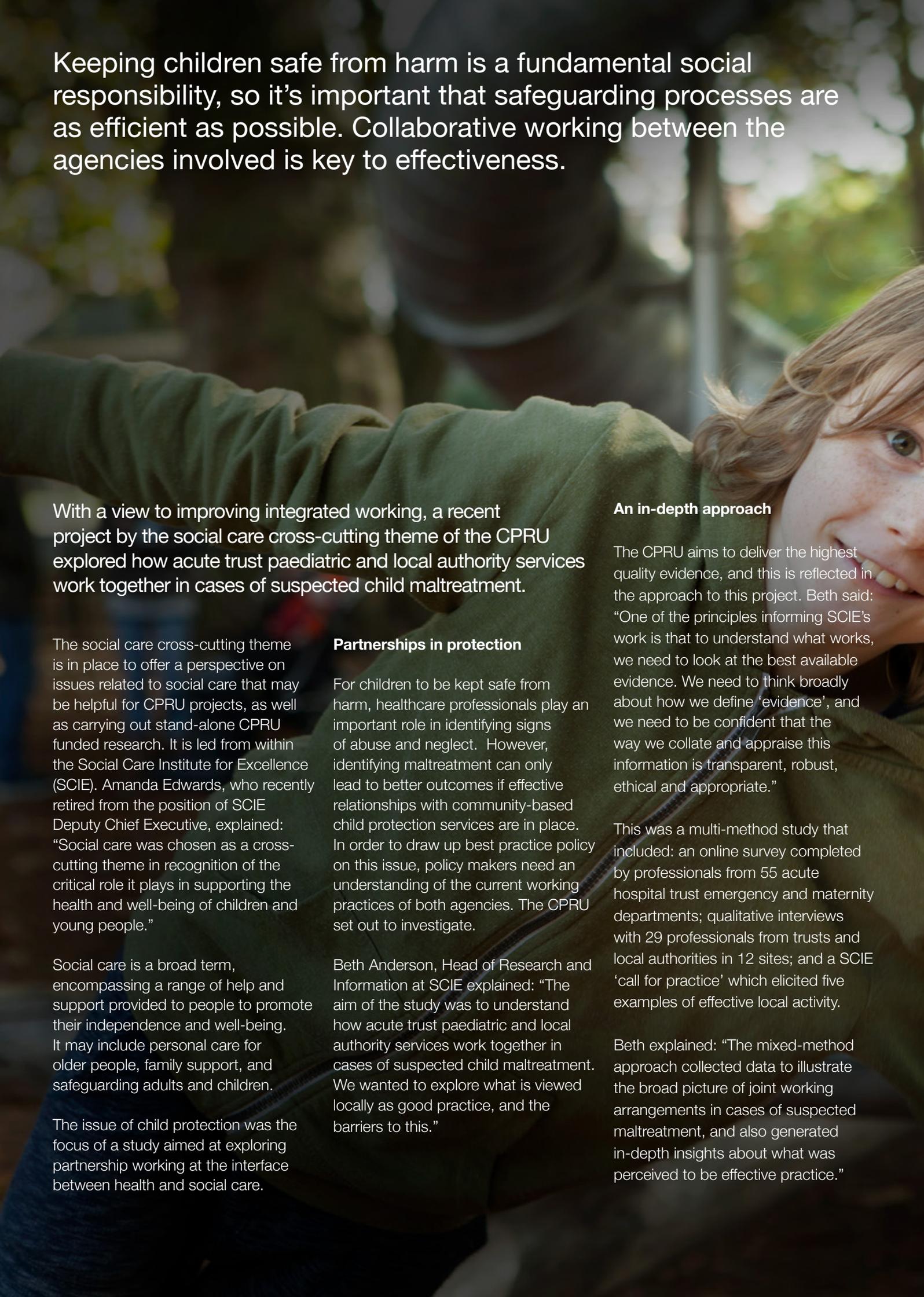


How can hospitals and social services best work together to protect children from maltreatment?

PARTNERSHIPS IN PROTECTION: WAYS OF WORKING TO KEEP CHILDREN SAFE



- We explored joint working between two agencies involved in child protection: hospitals and social services
- The overall approach to services mattered: shared vision and commitment to partnership was important
- Key findings have been published through videos and 'at a glance' summaries, as well as a full report and academic publication



Keeping children safe from harm is a fundamental social responsibility, so it's important that safeguarding processes are as efficient as possible. Collaborative working between the agencies involved is key to effectiveness.

With a view to improving integrated working, a recent project by the social care cross-cutting theme of the CPRU explored how acute trust paediatric and local authority services work together in cases of suspected child maltreatment.

The social care cross-cutting theme is in place to offer a perspective on issues related to social care that may be helpful for CPRU projects, as well as carrying out stand-alone CPRU funded research. It is led from within the Social Care Institute for Excellence (SCIE). Amanda Edwards, who recently retired from the position of SCIE Deputy Chief Executive, explained: "Social care was chosen as a cross-cutting theme in recognition of the critical role it plays in supporting the health and well-being of children and young people."

Social care is a broad term, encompassing a range of help and support provided to people to promote their independence and well-being. It may include personal care for older people, family support, and safeguarding adults and children.

The issue of child protection was the focus of a study aimed at exploring partnership working at the interface between health and social care.

Partnerships in protection

For children to be kept safe from harm, healthcare professionals play an important role in identifying signs of abuse and neglect. However, identifying maltreatment can only lead to better outcomes if effective relationships with community-based child protection services are in place. In order to draw up best practice policy on this issue, policy makers need an understanding of the current working practices of both agencies. The CPRU set out to investigate.

Beth Anderson, Head of Research and Information at SCIE explained: "The aim of the study was to understand how acute trust paediatric and local authority services work together in cases of suspected child maltreatment. We wanted to explore what is viewed locally as good practice, and the barriers to this."

An in-depth approach

The CPRU aims to deliver the highest quality evidence, and this is reflected in the approach to this project. Beth said: "One of the principles informing SCIE's work is that to understand what works, we need to look at the best available evidence. We need to think broadly about how we define 'evidence', and we need to be confident that the way we collate and appraise this information is transparent, robust, ethical and appropriate."

This was a multi-method study that included: an online survey completed by professionals from 55 acute hospital trust emergency and maternity departments; qualitative interviews with 29 professionals from trusts and local authorities in 12 sites; and a SCIE 'call for practice' which elicited five examples of effective local activity.

Beth explained: "The mixed-method approach collected data to illustrate the broad picture of joint working arrangements in cases of suspected maltreatment, and also generated in-depth insights about what was perceived to be effective practice."

“Different models can be effective as long as there is a shared vision and an explicit commitment to joint working.”

Sharing a vision

The study highlighted models that led to more effective identification and referral of maltreatment cases. Beth summarised some of the findings: “Support and training is key, so that hospital staff can feel confident in making decisions about referral cases of actual or suspected maltreatment. Information gathering is also critical for making these decisions, but this can be challenging in complex, multi-agency environments.

“We learned what practitioners think is effective in terms of the way hospital staff use information on whether or not a family is already involved with social care; specifically, that this information should be used to step up but not step down the level of concern.”

However, one of the overarching findings was that the general approach is what matters most: “We found that different models can be effective as long as there is a shared vision and an explicit commitment to joint working. That’s what makes the difference for effective inter-agency working.”

From paper to practice

One of the key convictions of SCIE is that research should not stay trapped in reports: it needs to be put into practice.

Beth explained: “It’s not enough just to do the research. We need to translate it into outputs useful for practice. Often our

research highlights solutions that make sense and are easy to talk about, but hard to achieve in the real world. So we try to highlight the implications of our findings for policy makers and practitioners.”

SCIE aims to communicate their work to the people who can act on it. As Beth explained: “One of the challenges with getting research out there is that social care is so diverse, encompassing a huge range of providers and commissioners.”

It’s for this reason that SCIE publishes its work in a variety of formats. Beth outlined the outputs for this study: “There is an article in a peer reviewed academic journal, and of course, we’ve compiled the full research report.

“But we work on the basis that people are busy and may not have time to read a 70-page document. They often want to know the key messages and what they need to do. So we also have what we call ‘at a glance’ guides on our website, and three short videos explaining how staff from different agencies can work together to protect children. This makes our research accessible to everyone.”

Amanda concluded: “This study has provided practical recommendations for professionals and policy makers about how to safeguard children effectively.” And with the excellent outreach of SCIE, it’s hoped that these recommendations will be put into practice to protect children from harm in the most effective way possible.

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More information

Social Care Institute for Excellence

www.scie.org.uk

At a glance: Partnership working in child protection

www.scie.org.uk/publications/atagance/atagance63.asp

Video: Partnership working in child protection: Cardiff case study

www.scie.org.uk/socialcaretv/video-player.asp?v=partnership-working-in-child-protection-cardiff

The study paper won an Outstanding Paper award from the Emerald Literati Network Awards for Excellence: Lewis J., Greenstock J., Caldwell K., Anderson B. (2015). Working together to identify child maltreatment: social work and acute healthcare. *J Integr Care*, 23(5), pp.302–312.

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Our aim is to provide evidence for policy and practice for the health and well-being of children, young people and families.

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