

## **Surrey Safeguarding Children's Partnership – Neglect Health Needs Assessment**

### **Introduction**

The Surrey neglect needs assessment is based on work done in Luton. It builds a picture of neglect across the county from across health and social care. It also draws on some of the findings of the community impact assessments completed throughout Autumn 2020.

The data element of the needs focuses on neglect across the 0-17 age groups. For the purpose of this report we will compare Surrey data with our statistical neighbours who are defined by the Department for Education as Cheshire East, Cambridgeshire, Hertfordshire, Bracknell Forest, Buckinghamshire, Hampshire, Oxfordshire, West Berkshire, Windsor and Maidenhead and Wokingham.

### **Definition of neglect**

The persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to:

- provide adequate food, clothing and shelter (including exclusion from home or abandonment)
- protect a child from physical and emotional harm or danger
- ensure adequate supervision (including the use of inadequate caregivers)
- ensure access to appropriate medical care or treatment

It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

Surrey Young people definition:

- Child neglect involves failing to meet a child's basic needs, including leaving them hungry, dirty, without sufficient shelter or clothing or meeting their medical needs.
- Child neglect is showing a lack of warmth towards a person, not worrying or caring about them, their education or safety.
- Child neglect causes the child to feel less than a valued human and is abuse.

### **Surrey Safeguarding Children's Partnership Safeguarding Children Strategic Plan 2020/21**

The Surrey Safeguarding Children's Partnership Safeguarding Children Strategic Plan 2020/21 includes the following objectives.

- Children who are at risk of harm as a result of neglect are identified and support is provided in a timely way to prevent harm.
- Partners can provide evidence that there is consistency in approach and quality, practitioners are increasingly skilled at identifying, assessing, preventing and intervening in cases of neglect.

## Level of need in the population

### The Overall Surrey Picture

There were estimated to be 261,905 children and young people aged 0-17 living in Surrey in 2018. As shown in Chart 1, we have a slightly higher percentage of children aged 0-15 living in Surrey than the England and South East average.

Chart 1:

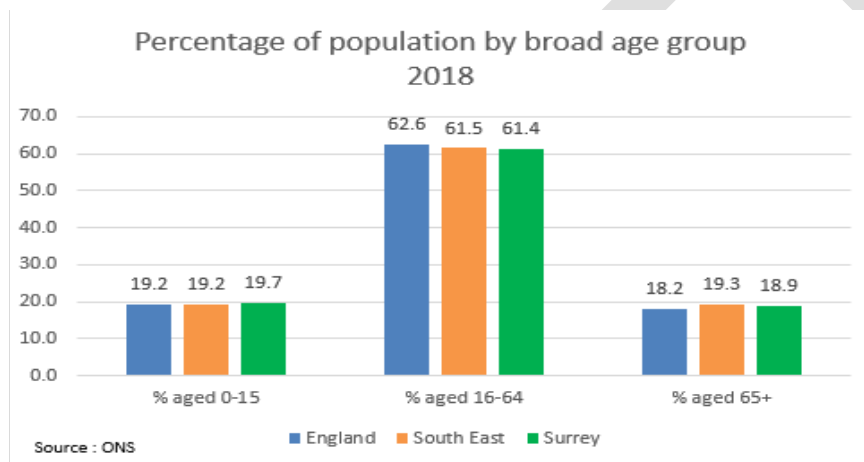
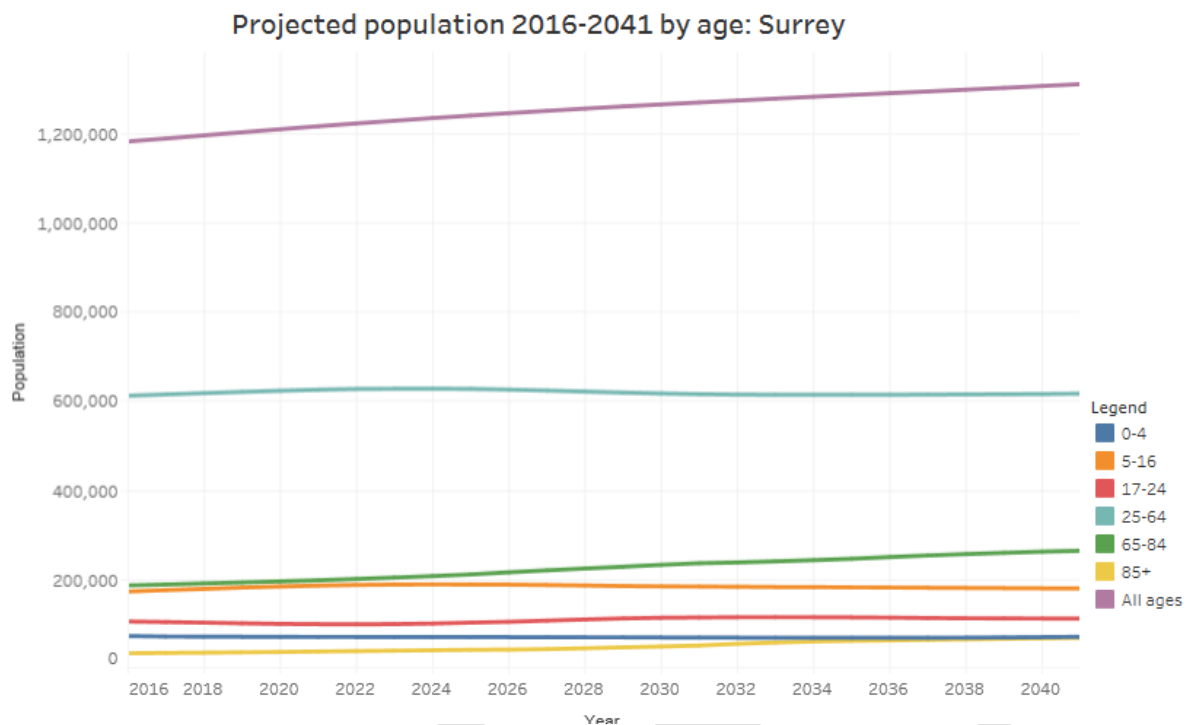


Chart 2:



We expect to see a rise in the Surrey population by 2041, but this overall rise will be due to a rise in the 65-84 age group. We predict we will see a fall in the 0-4 age group and the 5-16 will remain at a similar level.

Table 1 Change in population across District and Boroughs until 2025.

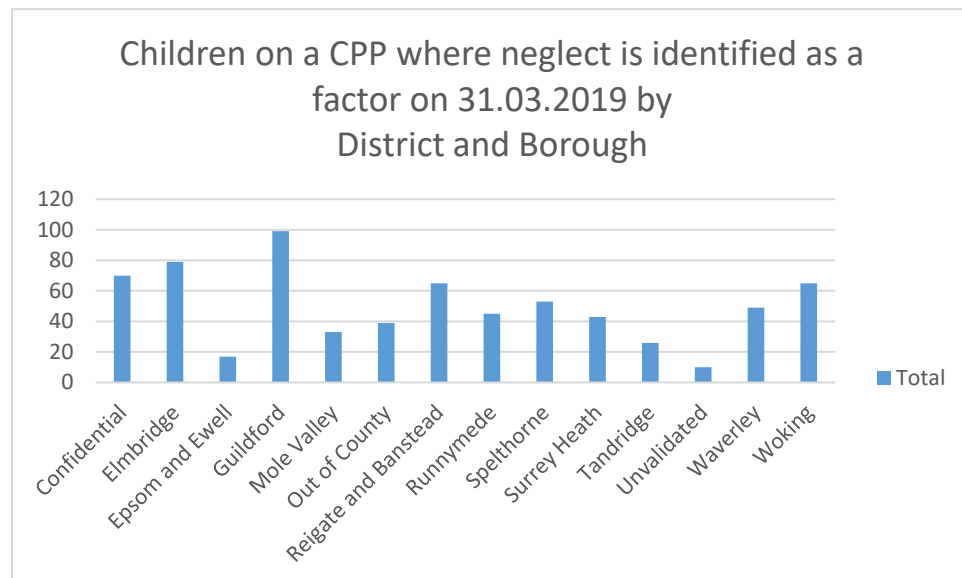
Area	Year	
	2019	2025
Surrey	252,039	257,996 2.4%
Elmbridge	32,661	33,309 2.0%
Epsom and Ewell	17,703	18,889 6.7%
Guildford	28,738	29,290 1.9%
Mole Valley	16,952	17,052 0.6%
Reigate and Banstead	32,391	33,796 4.3%
Runnymede	16,438	17,202 4.6%
Spelthorne	20,760	21,383 3.0%
Surrey Heath	18,353	18,320 -0.2%
Tandridge	18,061	18,711 3.6%
Waverley	26,881	27,205 1.2%
Woking	23,101	22,839 -1.1%
England	11,477,204	11,775,622 2.6%

By 2025 we expect to see an increase of 2.4% in the Surrey population, this data is across all ages, but should be viewed in light of the data in Chart 2 and is due to a higher life expectancy at birth for children born in Surrey.

## Surrey data on neglect

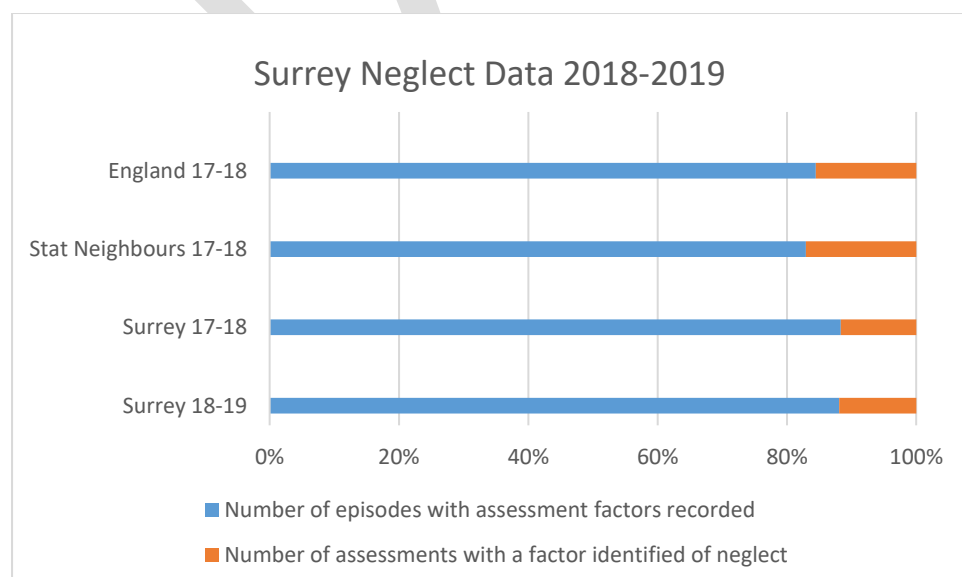
In 2018- 2019 there were 1296 children with a neglect factor identified at the end of their assessment of these 748 were Children In Need and they did not have a Child Protection Plan (CPP) during the year. There were 693 children on a CPP where neglect is identified as a factor.

Chart 3:



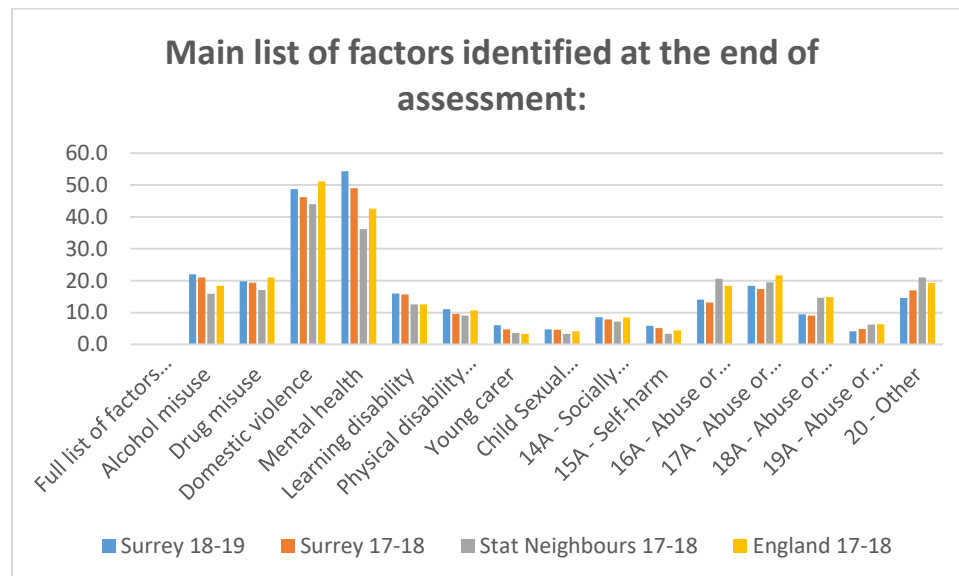
There does not seem to be a link between children on a CPP where neglect has been identified as a factor and deprivation within a locality. We know that Spelthorne has the highest number of children living in families on a low income and yet Guildford has the highest number of children with a CPP with neglect as a factor and Spelthorne has one of the lowest.

Chart 4:



There are a lower percentage of assessments with a factor of neglect identified in Surrey compared to our statistical neighbours and England. If we look at the data presented in Chart 3, we may not be identifying children correctly in certain district and boroughs which may be why overall our Surrey percentage is lower than other areas.

Chart 5:



There are a number of factors which may be linked with neglect, more detailed information is available, but the most common factors are identified above. In England domestic violence is the most common factor identified at the end of the assessment, in Surrey mental health is the most common factor.

Chart 6:

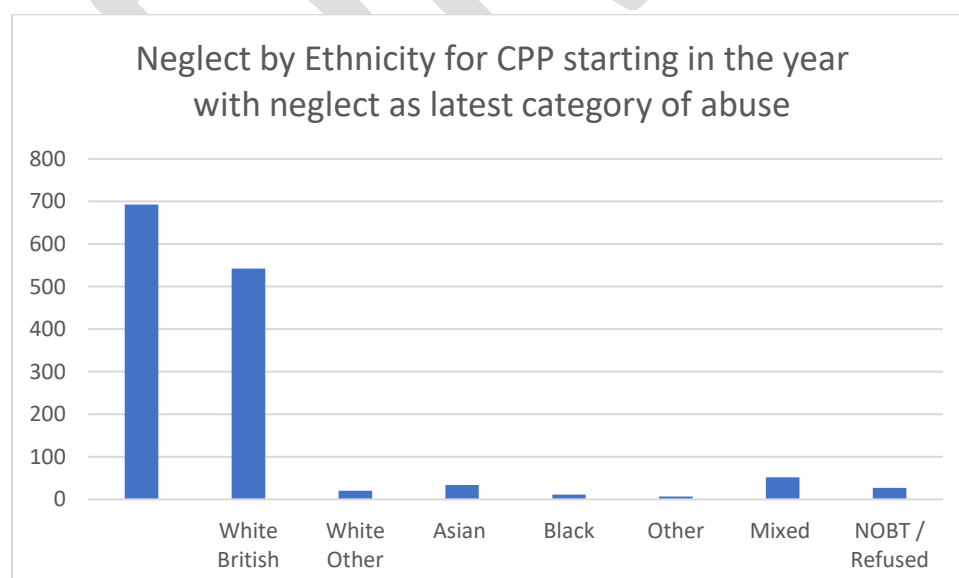
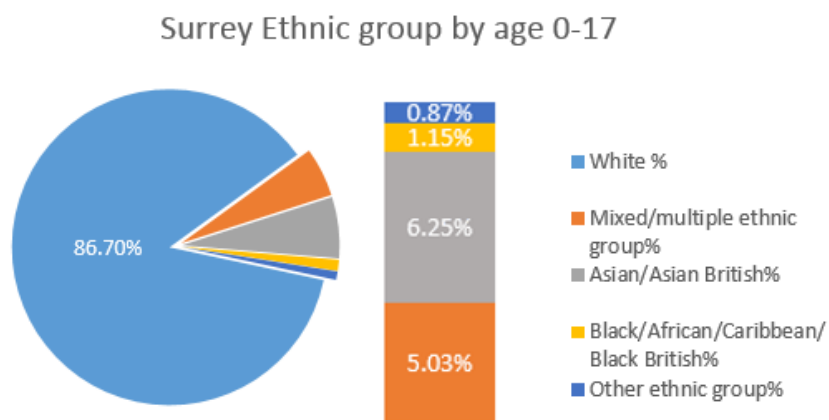


Table 2: Neglect by Ethnicity for CPP starting in the year with Neglect as Latest Category of Abuse		
	Number	%
	693	
White British	542	78.2
White Other	20	2.9
Asian	34	4.9
Black	11	1.6
Other	7	1.0
Mixed	52	7.5
NOBT / Refused	27	3.9

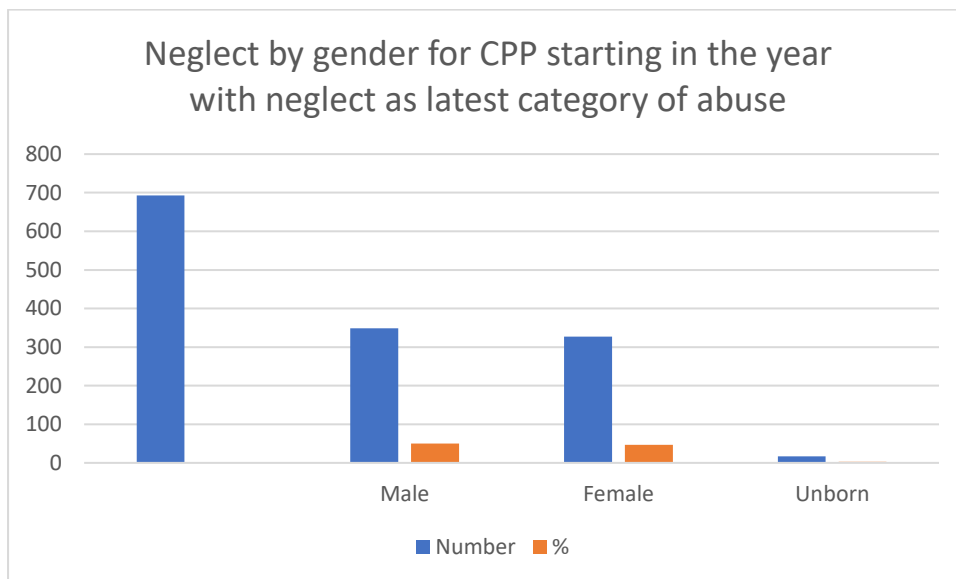
Diagram 1:



Source : Nomis on 30 September 2019

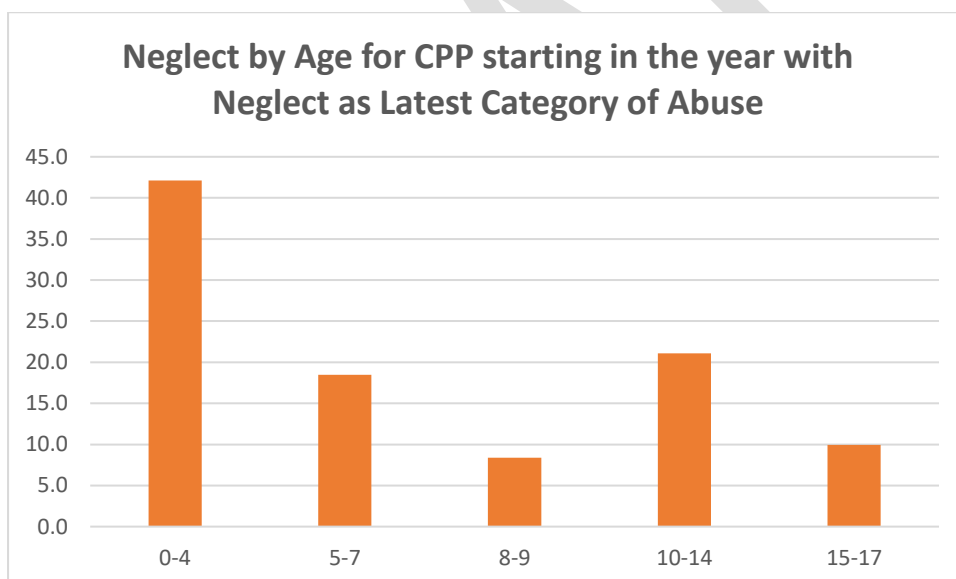
We can see that ethnicity for reports of neglect does not match the percentage of ethnic group populations within Surrey. We are seeing less reporting of neglect in the White population. They make up 86.7% of the population, yet only account for 78.2% of the reports.

Chart 7:



We can see a 50.4/ 47.2% split in terms of neglect by gender.

Chart 8:



This pattern of neglect by age group mirrors what we know nationally, neglect is more likely to be identified in the 0-4 followed by the 10-14 age groups.

### Factors which impact on levels of neglect.

According to the NSPCC<sup>1</sup>, any child can suffer neglect. But some children and young people are more at risk than others. These include children who:

- are born prematurely
- have a disability

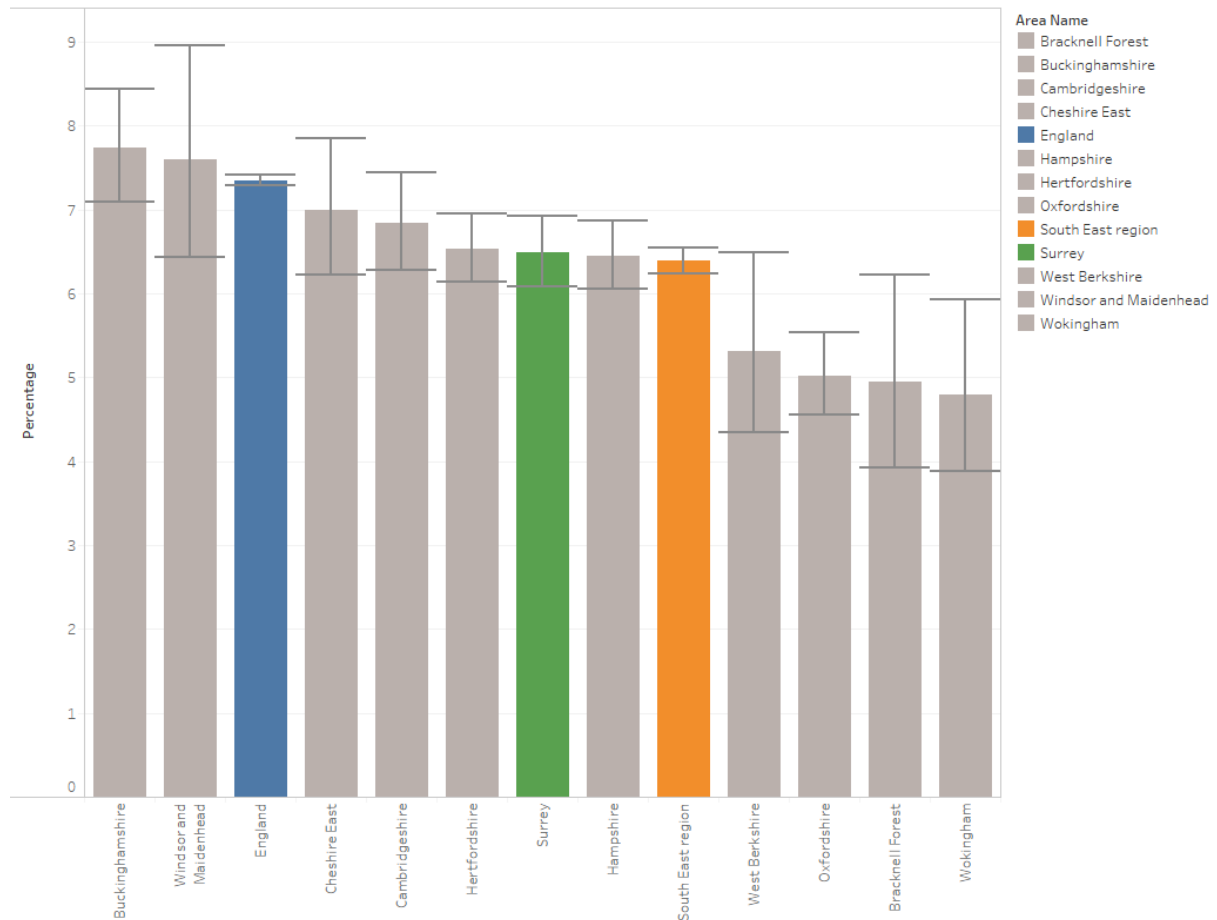
<sup>1</sup> <https://www.nspcc.org.uk/what-is-child-abuse/types-of-abuse/neglect/#at-risk>

- have complex health needs
- are in care
- are seeking asylum.

We know from evidence that children in these first three groups are more likely to have a low birth weight. Below is the data on babies born at a low birth weight in Surrey.

Chart 9:

Low birth weight of all babies, 2016



From these charts we can see that we had fewer babies who are born at a low birth weight compared to national figures, but higher numbers than the South East Region and some of our statistical neighbours. (Although the confidence interval (CI) is wide and crosses the CI for the SE region and so this may not be statistically significantly different). Taking into account the CIs Surrey has more low birth weight babies than Oxfordshire.



Evidence shows that other factors and life circumstances can make it harder for parents and carers to meet their child's needs. When one or more of these issues occur, it can put a child at risk of neglect. These include:

- Children living in home where there's **domestic abuse** are more likely to experience other types of abuse and neglect.
- Children living with parents with **alcohol or drug problems** can be more at risk of harm and neglect.

Number of successful completions / all clients in treatment who live with children	Latest period: 01/04/2017 to 31/03/2018	
	Surrey	National
<b>Opiate</b>	10.8%	7.6%
<b>Non-opiate</b>	63.7%	41.3%
<b>Alcohol</b>	43.9%	43.4%
<b>Alcohol and non-opiate</b>	50.0%	40.3%

Ref: Figures from Public Health England report Diagnostic Outcomes Monitoring Surrey, 2017-2018 Q4, Surrey. Table 4: Successful completions of clients who live with children as a proportion of all clients in treatment who live with children under the age of 18

- If a parent has **learning difficulties**, evidence shows that some parents can struggle to understand what they need to do to provide proper care for their child. In some cases, this can lead to a child being neglected.
- Where parents or carers have a **mental health problem**, this can lead to their children being at a higher risk of abuse or neglect.
- **Deprivation**

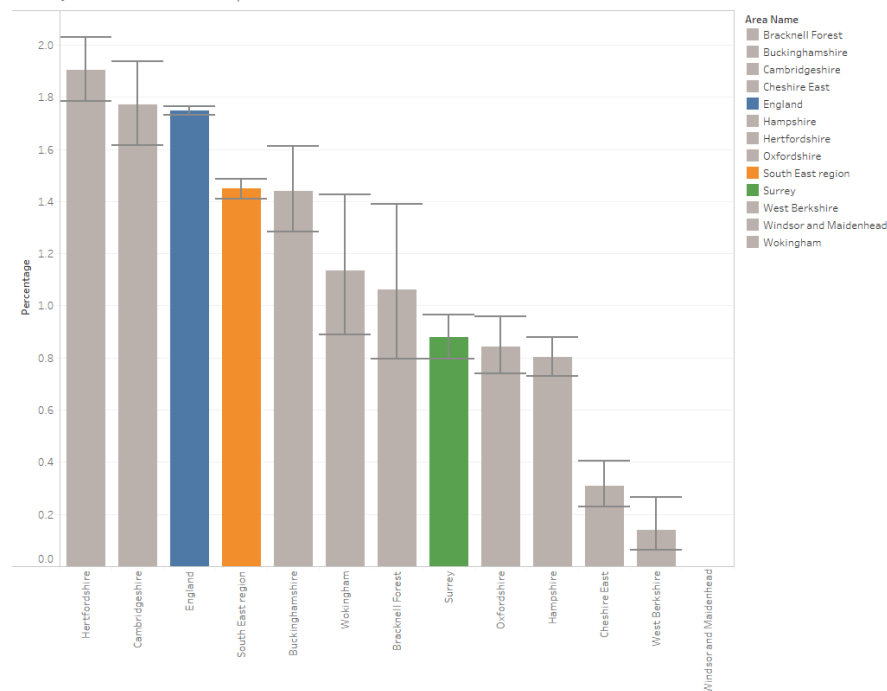
There is a strong association between families' socio-economic circumstances and the chances that their children will experience child abuse and neglect. Evidence of this association is found repeatedly across developed countries. This conclusion can be drawn despite the major limitations in the evidence from the UK.<sup>2</sup>

Housing and financial worries can put a lot of stress on parents. This can stop them being able to provide the practical and emotional support that children need, which can lead to neglect.

<sup>2</sup> <https://www.jrf.org.uk/report/relationship-between-poverty-child-abuse-and-neglect-evidence-review>

Chart 10:

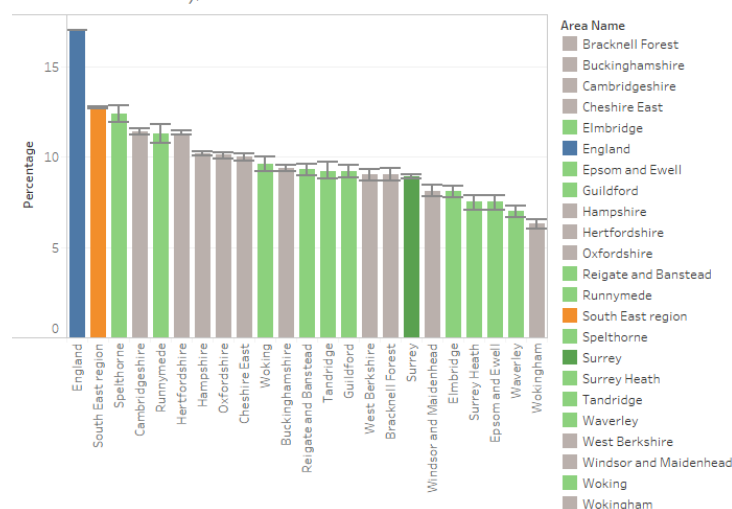
Family homelessness, 2017/18



We can see that we have a statistically lower percentage of family homelessness than England and the South East, although we have a higher percentage than Cheshire East and West Berkshire.

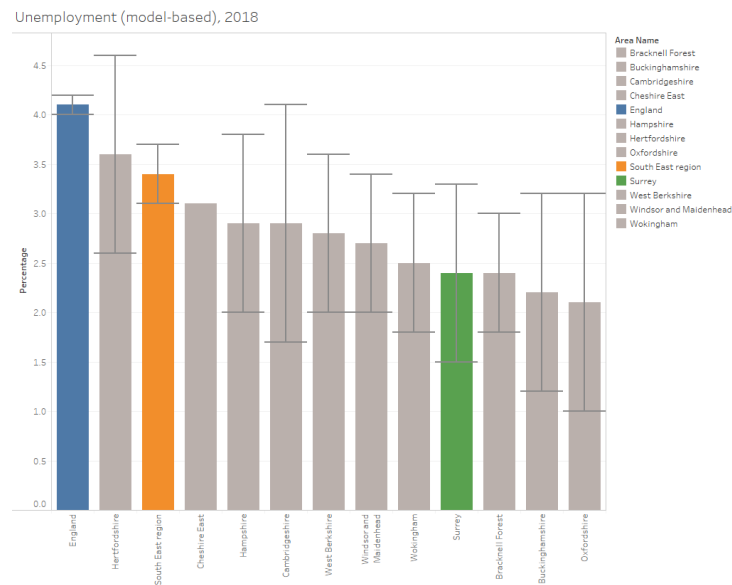
Chart 11:

Children in low income families (all dependent children under 20), 2016



Surrey has lower numbers of children living in low income households than the England and South East average, although some districts and boroughs have higher numbers. This includes Spelthorne and Runnymede.

Chart 12:



We can see that we have fewer homeless families and fewer children living in low income families in Surrey, although this should be seen in the context of the relative wealth of the population of Surrey and the large gaps between those on higher and low incomes within the county.

- Family, friends, neighbours or the wider community can give parents the **support** they need to help keep their child safe. But sometimes parents don't have this support which can put children at a higher risk of neglect. We know that being underweight can be an indicator of neglect along with attendance at A&E for accidental injury.

Chart 13:

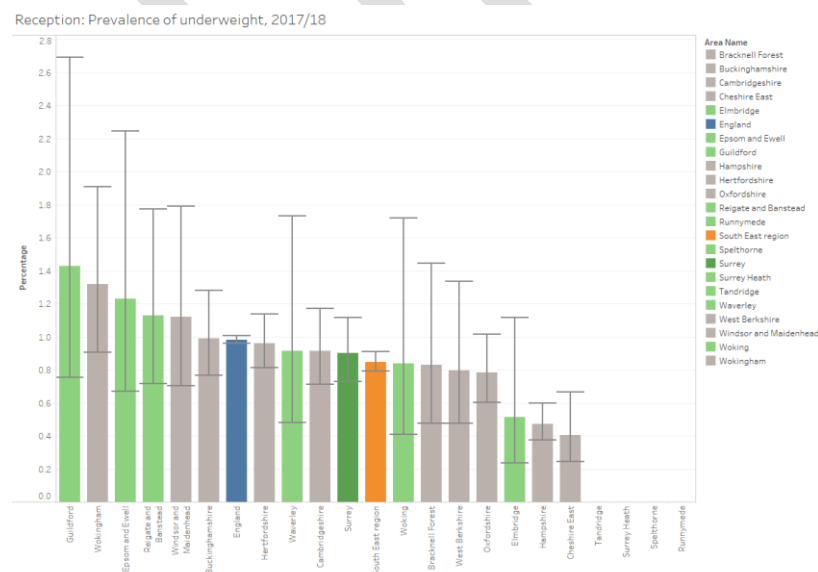


Chart 14:

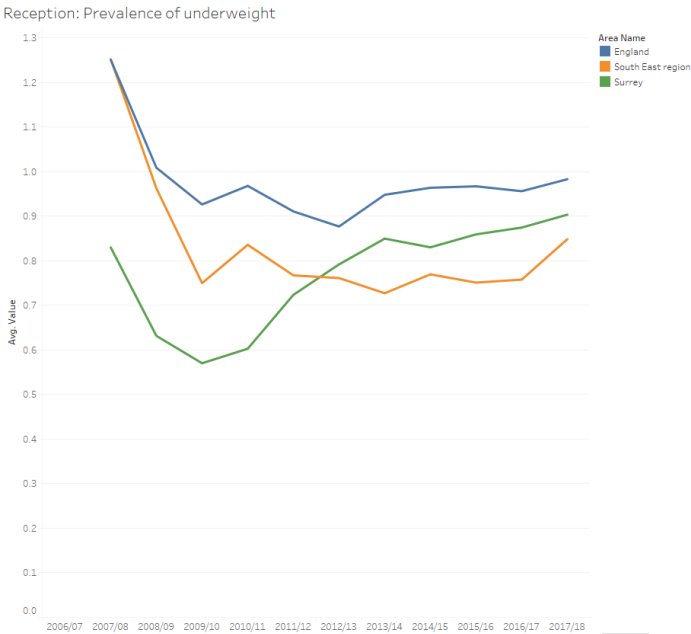


Chart 14 shows that Surrey has higher numbers of underweight children in year R than the South East average, but lower numbers than the England average. Chart 15 shows that although there is some crossover of CI, by year 6, Surrey has more underweight children than both the South East and England average.

Chart 15:

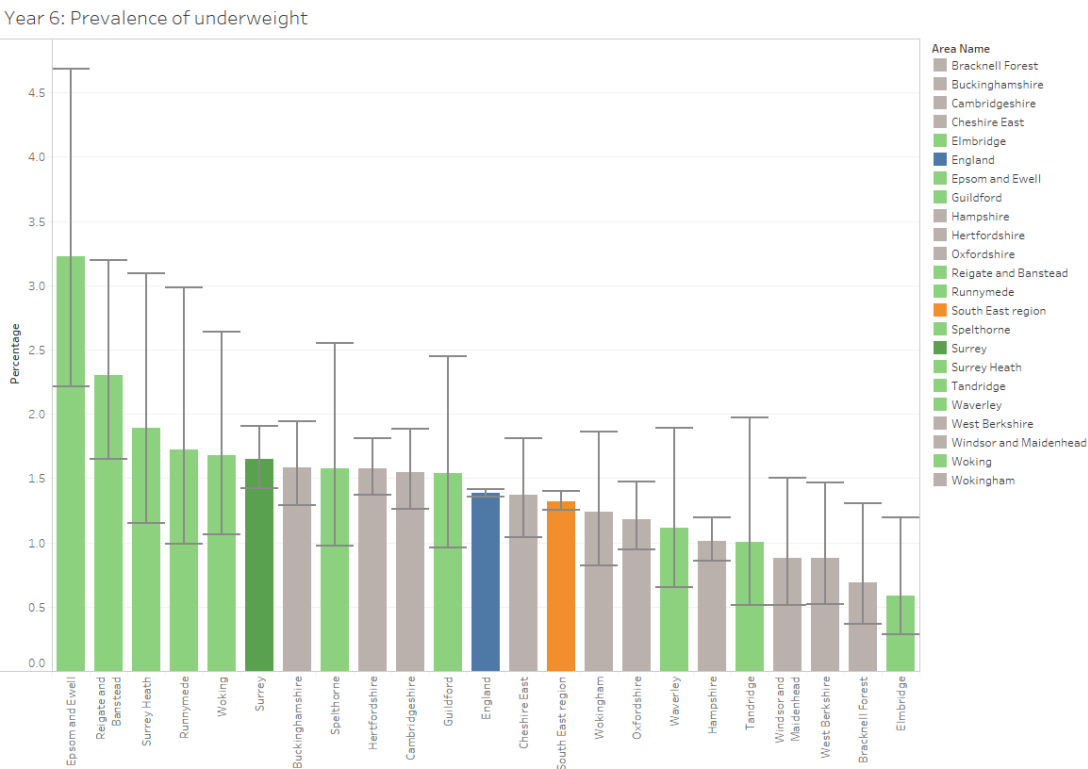


Table 5:

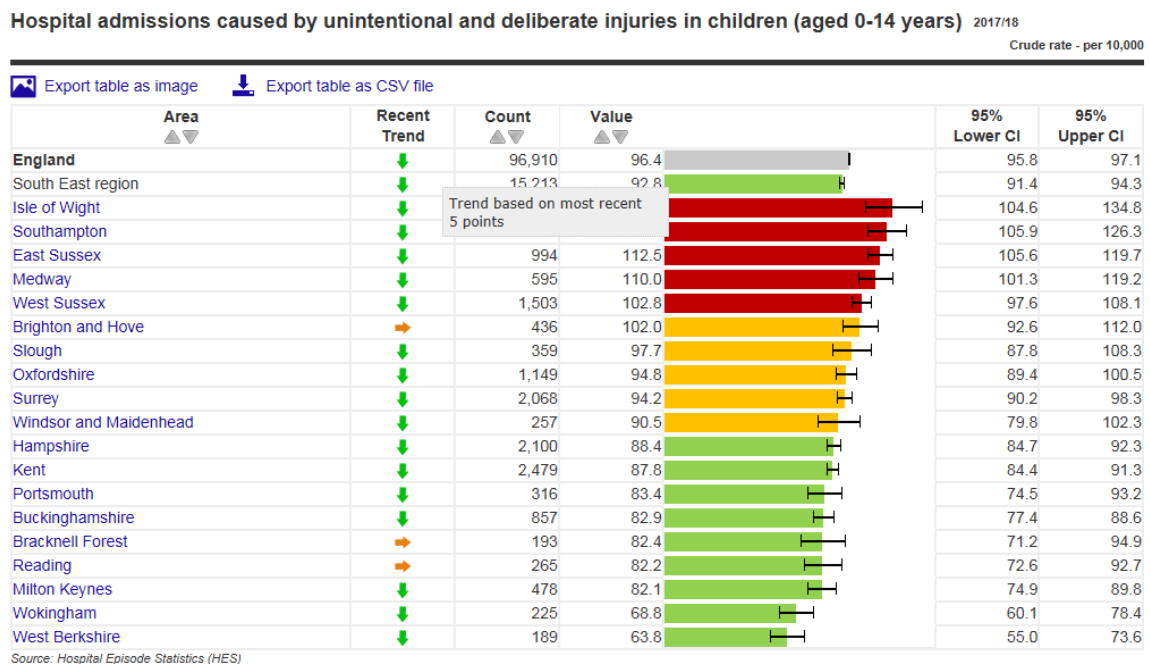


Table 6:

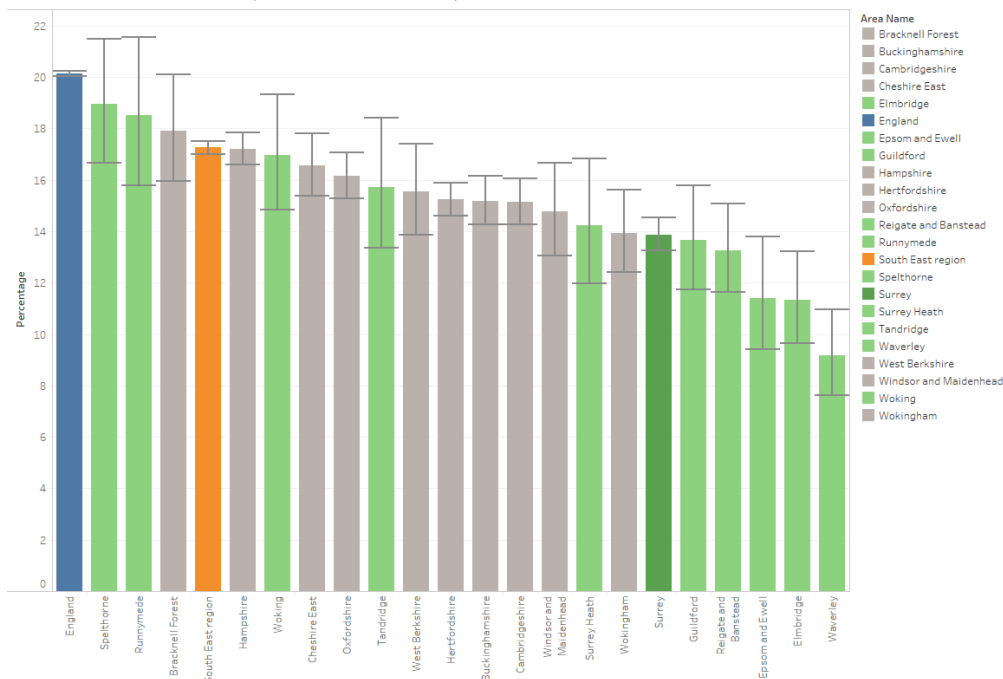


Table 5 shows that Surrey has similar to England and South East region averages for A & E attendance for unintentional and deliberate injuries in 0-14 but is performing worse for A&E attendance for 0-4 year olds.

## Other relevant data

Chart 16:

Year 6: Prevalence of obesity (including severe obesity)



Surrey has a lower prevalence of childhood obesity than England and the South East region, but some areas of Surrey – Spelthorne and Runnymede have a higher prevalence than the South East region.

Table 7:

### Population vaccination coverage - MMR for one dose (2 years old) 2017/18

Proportion - %

[Export table as image](#)

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Area	Recent Trend	Count	Value	95% Lower CI	95% Upper CI
England	↓	612,692	91.2	91.1	91.2
South East region	↓	97,911	91.5	91.4	91.7
Portsmouth	↑	2,524	95.1	94.2	95.9
West Sussex	→	8,863	94.7	94.2	95.1
Wokingham	→	1,594	94.4	93.2	95.4
West Berkshire	→	1,550	94.1	92.9	95.1
Southampton	↑	3,081	93.9	93.0	94.6
Buckinghamshire	↓	5,969	93.3	92.7	93.9
Bracknell Forest	↑	1,416	93.3	91.9	94.4
Milton Keynes	↑	3,700	93.1	92.2	93.8
Oxfordshire	↓	7,516	93.0	92.4	93.5
Hampshire	↓	13,915	92.3	91.9	92.7
East Sussex	↑	4,896	91.9	91.2	92.6
Windsor and Maidenhead	→	1,586	91.1	89.7	92.3
Medway	↓	3,482	90.4	89.5	91.3
Brighton and Hove	↓	2,526	90.3	89.2	91.4
Kent	↓	16,283	90.1	89.6	90.5
Reading	↓	2,701	88.8	87.7	89.9
Surrey	↑	12,992	88.6	88.1	89.1
Isle of Wight	↓	1,121	87.7	85.8	89.4
Slough	↓	2,196	87.1	85.8	88.4

Source: Cover of Vaccination Evaluated Rapidly (COVER) data collected by Public Health England (PHE). Available from NHS Digital

Table 8:

Population vaccination coverage - Dtap / IPV / Hib (2 years old) 2017/18 Proportion - %

[Export table as image](#) [Export table as CSV file](#)

Area	Recent Trend	Count	Value	95% Lower CI	95% Upper CI
England	↓	639,162	95.1	95.1	95.2
South East region	↓	101,594	95.0	94.8	95.1
Portsmouth	↑	2,589	97.6	96.9	98.1
Milton Keynes	↑	3,866	97.2	96.7	97.7
Bracknell Forest	↑	1,475	97.2	96.2	97.9
Southampton	→	3,188	97.1	96.5	97.7
Oxfordshire	↓	7,832	96.9	96.5	97.3
Buckinghamshire	↓	6,182	96.6	96.2	97.1
Wokingham	→	1,631	96.6	95.7	97.4
West Berkshire	→	1,591	96.6	95.6	97.4
Windsor and Maidenhead	→	1,680	96.5	95.5	97.3
East Sussex	→	5,110	96.0	95.4	96.5
West Sussex	↓	8,975	95.9	95.4	96.2
Hampshire	↓	14,365	95.3	95.0	95.6
Slough	→	2,398	95.2	94.2	95.9
Reading	↓	2,878	94.6	93.8	95.4
Medway	↓	3,625	94.2	93.4	94.9
Kent	↓	16,891	93.4	93.1	93.8
Isle of Wight	→	1,192	93.3	91.8	94.5
Surrey	↑	13,547	92.4	92.0	92.9
Brighton and Hove	↓	2,579	92.2	91.2	93.1

Source: Cover of Vaccination Evaluated Rapidly (COVER) data collected by Public Health England (PHE). Available from NHS Digital

Surrey has lower levels of population MMR coverage and does not have herd immunity (95%), for 2-year-old vaccinations Surrey is performing similar to the England and South East region average, (although still without herd immunity) this should be seen in the context that Surrey generally performs better in most health-related areas.

### Information from Surrey Police

There were 117 cases of Cruelty to or Neglect of children from April 2019 to April 2020 recorded by Surrey Police. These have been broken down by borough and district below:

Elmbridge - 12 reports  
 Epsom & Ewell – 8 reports  
 Guildford – 10 reports  
 Mole Valley – 9 reports  
 Reigate & Banstead – 27 reports  
 Runnymede – 6 reports  
 Spelthorne – 8 reports  
 Surrey Heath – 5 reports  
 Tandridge – 12 reports  
 Waverley – 6 reports  
 Woking – 14 reports

### Report of the Surrey Multi-agency Self-evaluation on Neglect

The SSCP carried out a multi-agency self-evaluation on neglect and the below details the recommendations from that piece of work.

- Promotion of the refreshed neglect strategy (to be developed) across agencies; with a model which provides a shared narrative on neglect typology, indicators and the impact for the child. (The model selected will need to be compatible with the Family Safeguarding Model in CSC and GCP2.)
- Promotion of rolling programme of evidence based multi-agency neglect training which includes awareness, recognition and interventions that work. Evaluation and impact to be monitored by the Learning From Practice Group. Neglect supervision training to be considered.
- Outcomes of the comprehensive neglect audit (2020) conducted by the SSCP Learning From Practice Group to inform the Neglect Subgroup priorities and action plan.
- Strengthening of the neglect component of the partnership dataset with regular oversight and scrutiny of progress by the Partnership Executive.
- Consideration of an Early Help system which allows professionals to have a shared Early Help assessment, plan and chronologies and enhance communication. This will also benefit the step up and down processes and prevent duplication of effort for both workers and families.
- Surrey Local Authority to consider a review of 0-19 services to; a. strengthen identification of neglect, through increased health visitor resource and engagement with families within the home environment and b. provide a 0-19 team offer to 16 and 17 year olds who do not attend school.
- Consolidation and promotion of messages on thresholds across the partnership to build confidence in responses to neglect, with additional emphasis on voice of the child to be incorporated into the Surrey working document.
- Refresh and review of partnership information sharing agreement to include a strengthened conduit between adult and child services.
- Consideration of a dedicated neglect section within the SSCP website.
- Evaluation of the community approach to neglect is suggested to include housing departments, environmental health colleagues, and employment services for example.

## **Community Impact Assessment Findings**

In October 2021 Surrey County Council published a community impact assessment. The Community Impact Assessment (CIA) explores health, social and economic impacts of COVID-19 among communities across Surrey, communities' priorities for recovery, and what support these communities might need during the second wave of the pandemic. The community impact assessment looked at pre-pandemic issues facing Surrey communities and how they may have been exacerbated. The following are excerpts of these reports that are relevant to this neglect assessment of need.



## Geographical Impact Assessment:

The Geographical Impact Assessment explored the way in which local places in Surrey have been impacted by Covid-19 and aims to identify specific areas that have been disproportionately impacted. The analysis identifies highly impacted places in terms of Health, Economy and Vulnerable Groups. Overall the analysis identifies that the impact of Covid-19 on local areas in Surrey is varied and nuanced and places that are impacted in one way are not necessarily impacted in the others. Similarly, the analysis shows that there does not appear to be a significant relationship between deprivation and the different dimensions of impact, which suggests that those areas that have been impacted are not necessarily the most deprived. It is recommended that partners across Surrey consider the nuance of the impacts and adapt their response to the pandemic and recovery in local areas to reflect these findings.

There is no single type of impact that can summarise which areas have been most affected during the pandemic. Often areas that are more impacted along one dimension are less impacted along other dimensions.

- There does not appear to be a relationship between those places that have been impacted in terms of health and those places that have been impacted economically.
- There is some relationship between places with a high prevalence of vulnerable groups with places that have been impacted in terms of health and economy.
- Most of the areas that show high combined impacts are found in the North, South East and South West of the county, with the highest numbers in Spelthorne, Mole Valley and Waverley.
- Typical measures of deprivation do not necessarily correlate to the areas that have been most impacted, especially in terms of health impacts, though further analysis is required to explore this.

## The Gypsy, Roma, Traveller Rapid Needs Assessment:

Surrey Safeguarding Children's Partnership have raised concerns in relation to how well the Surrey system is working in partnership to safeguard children and adults from GRT communities. The concerns lie specifically with:

- the approach to risk management & safeguarding children, young people alongside vulnerable adults
- engagement with schools, early learning and social care
- coordination of service responsibilities across the partnership –where it is evident that much good work is undertaken or attempted but poorly co-ordinated and where information flows could be improved.( In my experience , this has been a problem across most parts of the country but one where there is a real need to develop strong partnership approaches such that there is an understanding of complimentary services and confidence in the arrangements for passing on alerts )

These concerns are led by early findings from an independent review commissioned by the SSCP Exec. These have arisen from the findings of a case review commissioned by SSCP/LSCB.

The findings of the GRT rapid needs assessment have formed the following actions:

- Anti-discrimination and cultural awareness training across Surrey to address the ongoing and established systemic issues that impact the way in which the Surrey system is able to identify and respond to the needs of the GRT communities effectively and a commitment to improving outcomes for GRT communities.
- All system wide staff working with GRT communities understand and implement the corporate parenting responsibilities with a particular focus on education.
- Clear read across between the GRT strategy and wider system strategies including the First 1000 days, Family Resilience, Helping Families Early strategies and the SEND transformation programme
- Urgent need for literacy training and support for community members.
- Further links with the Surrey GRT Forum are needed, especially to enable engagement with community members
- Further joined up, co-ordinated and sustainable support for the local agencies and organisations working with GRT communities is required and should overseen and co-ordinated by the GRT strategy group.
- Work closely with organisations like Friends, Families and Travellers who are supporting the work of the NHS England and NHS Improvement Health Inequalities National Advisory group, as part of their role on the VCSE Health and Wellbeing Alliance.

#### **Areas for consideration:**

The data within this need's assessment is to inform a countywide neglect strategy and as such the following considerations are recommended:

- Place: are services configured in the right way to provide support to children experiencing neglect. The borough level data shows the potential for support in certain areas. Does that reflect practitioner/organisational experience/knowledge? Can the 0-19 transformation support this?
- The system: build on learning and feedback from the multi-agency self-evaluation, including system ownership of the neglect strategy once developed.
- The next 5 years: The population estimates show the population will stay steady across the 0 -16-year-old age groups. We predict we will see a fall in the 0-4 age group and the 5-16 will remain at a similar level. If the systems are working, then children should already be identified and therefore we should not see any increase in neglect in those age groups over the next 5 years.