

# 7 Minute Briefing- Princess

## Resources

Safeguarding Partnership Board Website

<http://www.safeguardingcambspeterborough.org.uk/children-board/>

Safeguarding Training: Virtual Briefings (Microsoft Sways), Online Training and Training Resources

<http://www.safeguardingcambspeterborough.org.uk/availabletraining/>

## Professional Practice Points

From Princess's case, findings show that professionals should

- explore the family's history and explicitly acknowledge this within assessments [Tools for Gathering and Recording Family Composition](http://www.safeguardingcambspeterborough.org.uk/safeguardingcambspeterborough.org.uk)
- maintain an open mind, challenging professional beliefs / assumptions as part of safeguarding practice, especially where information received is contradictory
- consider that a child might not be telling the truth about a serious issue. Professionals should see this as a cause for concern as to what is happening for that child.
- ensure that information is shared with all relevant partners working with the child
- a child's lived daily experience should be sought and understood
- for any child in care, identify the features of a child's cultural life from language to food, music to family tradition and to promote these as actively as possible
- where possible a child in care's family contact and daily routines should be maintained

## Resolving Professional Differences

When professionals feel that their voices are not being heard and professional opinions not being respected, they should consider escalating their concerns further. This should be through the use of the multi-agency **Resolving Professional Differences Policy**

[Safeguarding Children Resolving Professional Differences \(Escalation\) Policy | Cambridgeshire and Peterborough Safeguarding Partnership Board](http://www.safeguardingcambspeterborough.org.uk/escalation-policy-cambridgeshire-and-peterborough-safeguarding-partnership-board/)

Because of the need for safe accommodation, which time and again had been withdrawn because of destructive behaviour, the risk Princess posed had become the deciding factor about where she lived, who she lived with, what she was able to do. The constraints on her life fundamentally impacted on her capacity to being able to lead an ordinary life. This without question is not due to a lack of concern from individual professionals but is due to a **lack of placement options and the failure of the wider system** to provide appropriate care for children like Princess



## Background

Princess and her siblings became known to statutory services due to domestic abuse, her father's alcohol use and allegations that Princess had experienced physical abuse. After being missing from home there were increasing concerns about Princess's welfare including vulnerability to exploitation, self-harm and her, at times, aggressive behaviour. A Mental Health Assessment (MHA) undertaken by CAMHS concluded that Princess was emotionally dysregulated but did not have a mental health need at the time. Family relationships deteriorated and she was placed in temporary foster care with parental agreement under S20 of the Children Act. Princess stayed in different foster care placements but continued to go missing and made threats of suicide and violence. The Local Authority applied for an Interim Care Order and an out of county placement in a residential home. At the home Princess's behaviour escalated with her repeatedly running away, older men contacting her, self-harm and suicide attempts and physical assaults on staff and serious damage to the home. A Deprivation of Liberty Order was granted by the court to protect her from exploitation and from absconding. This marked the beginning of a long series of moves between different types of accommodation, supported by agency staff, with the ratio of staff increasing over time eventually reaching 8 staff to 1 child.

## Behaviours

Trauma Informed Practice has raised awareness of the way in which specific situations can trigger behavioural responses, i.e. hyper-arousal and emotional dysregulation. What can be harder for professionals to contemplate, is that behaviour may not have been triggered by a trauma response but could be instead a very conscious action to achieve an outcome. In reality professionals need to consider that both causes can be present.

## Trauma + Voice of the Child

Good practice was identified that Princess's voice was sought and listened to. Understanding what she wanted, what she was feeling and why she became so dysregulated was not straightforward. Professionals should be **curious in relation to the child's feelings and the reasons behind a child's behaviour**. However, professionals also need to consider that a child may not always be telling the exact truth. If this is happening, then it is in itself of concern and requires consideration from the practitioner as to why this might be the case. <https://www.safeguardingcambspeterborough.org.uk/download/lived-experience-of-the-child-practice-guidance/>

<https://www.researchinpractice.org.uk/all/topics/trauma/>

[www.safeguardingcambspeterborough.org.uk](http://www.safeguardingcambspeterborough.org.uk)