



Child neglect toolkit - Adolescent age profile guidance

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The information on this document aims to provide guidance regarding spotting the signs of neglect. These may be considered and discussed with children and their family / carer when completing Neglect Toolkit 2022.

During conversations with families you should utilise the 4 key considerations as per Child Neglect Strategy 2022.

Key Considerations

1. What has been identified?
2. Which of the child's needs are not being met?
3. Why are some needs not being met?
4. What could help ensure the child's needs are met?

Relational Practice

Ensure you consider strengths and vulnerabilities and record both areas. This is key for building sustainable relationships with adolescent and family members.

The guidance is not designed as a prescriptive list of questions. Professional should use professional curiosity when analysing gathered evidence as every child, young person and family is unique. When engaging with an adolescent, the language used is important. Avoid descriptions that place the young person at fault. Consider they are not putting themselves at risk, but they are at a higher vulnerability. Also consider non-verbal language and visual communication to assist the young person express themselves or understand what is being asked.

Different help maybe required at different times, the Rochdale Children Needs and Response Framework should be considered in partnership of the neglect assessment.

PHYSICAL CARE

The development of young people in this age group may be affected by their housing conditions, lack of hygiene support or awareness and access to nutritious food. One, or the combination of these factors may contribute a lower wellbeing factor than other peers. The guidance provided below may indicate signs neglect.

Nutrition:

Observation of a mealtime is useful but not always possible. Information can therefore be gained by asking questions sensitively about foods given, whether set mealtimes, routines etc. and the answers given backed by observation of the kitchen, working utensils, storage, and supply of food. It is important that this is not perceived as intrusive. Consider whether the young person is preparing meals for younger siblings and if this is appropriate. If young person is a registered young carer then meal preparation may be appropriate for the family. You will need to check with the local authority young carer's provider to ascertain if they have been identified and assessed as a young carer.

Housing:

If deficient, note what effort has been made to remedy and whether it is possible for the care giver to take practical remedial steps to improve.

Clothing:

Does the care giver(s) clean, repair, replace outgrown clothing. Be mindful as to whether the carer challenges clothing worn by the young person which may not be age appropriate. Observe whether the clothing is appropriate for the weather. Observe whether shoes fit and are appropriate – this also may depend on age and whether the young person(s) is deciding what is worn.

Hygiene:

Observe what is temporary, acceptable dirtiness from normal day to day activities and what seems to be ingrained "long term dirt" e.g. behind ears, washing/bathing, according to age appropriate needs. Consider puberty needs, provision of appropriate toiletries including sanitary wear.



Safeguarding is everyone's business

HEALTH

Adolescents may be at an increased vulnerability when making decisions regarding their health. This may be through a lack of appropriate knowledge or lack of guidance from parent / carer. Guidance below may help the assessment of medical neglect.

Check on the reasons for non-attendance at health appointments. If immunisations are missed what is the reason? If failure to attend for a routine screening appointment (i.e. dental appointment or developmental assessment) or follow up appointments/investigations, what is the reason given? E.g. is there a problem with transport, costs etc. Does the young person have a disability/ongoing medical needs? Are prescriptions for medication obtained and administered appropriately to the young person? If not what are the reasons given.

Consider whether the caregiver's/young person's views are reasonable/ unreasonable; ask yourself whether this is wilful medical neglect.

What is the impact on the young person?

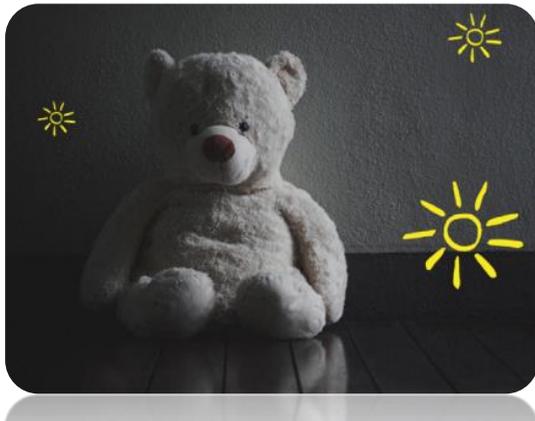
If health professionals are involved are plans and appointments supported by the carer? Has the carer discussed health choices/contraception with the young person?

SAFETY AND SUPERVISION

Adolescents may be at a higher vulnerability which may result in serious injury. Young person should have appropriate self-awareness of safety provided by parents / carers. The questions below may assist in spotting the signs of possible neglect.

In the presence of the caregiver:-

- What is their awareness of safety?
- Is there evidence of hazardous substances?
- Does the caregiver have an apparent conscious awareness of the young person, what he/she is doing, whether there may be danger?
- Ask about what the young person is told about personal safety?
- If possible, observe whether the young person's behaviour or actions gives an indication of being told or made aware of any safety issues.
- What measures are in place around internet safety, in particular social media and inappropriate websites/material?
- Electronic devices (mobile phones, gaming consoles etc.) including frequency of use/age appropriate gaming?
- Where self-harm or substance misuse is a concern, are carers implementing an appropriate safety plan? (Include alcohol use/binge drinking/smoking/e-cigarettes).
- Are friends appropriate? Are measures taken to get to know young person's friends/ensure they are appropriate?
- If the young person is involved in an intimate relationship is this age appropriate, safe and appropriately monitored by the carer?
- Is there a set safe routine in place in the home and is the young person getting enough sleep?



In the absence of caregiver:-

- What are the child-care arrangements when the care-giver is away?
- Are babysitters always familiar to the young person, are they competent and of a reasonable age and maturity? The NSPCC recommends that a babysitter should not be under the age of 16 years and should be suitable person to care for the young person.
- Does the caregiver leave a contact number for the babysitter?
- Is the young person looking after younger siblings or other people's children and is this appropriate?
- Is there a safe plan in place when the young person is out in the community such as safe routes home, set time to be in etc.?
- Are checks undertaken where young person doesn't come home on time or isn't where they say they should be?
- Is the young person often missing from home/education? Do carers react appropriately?
- Is the young person safe crossing the roads and have been show how?
- Is the carer aware of CSE risks? Such as money/ clothes/gifts that are unaccounted for.
- Is the young person involved in ASB/criminality in the community? Do carers react appropriately?
- Does the carer check if young person stays away from home/ who they are staying with/appropriate friendship groups?
- Does the young person have a working mobile phone if appropriate?
- Is the young person at risk of or involved in radicalisation?
- Has consideration been given to young person's views regarding issues such as forced marriage or FGM?
- Reciprocation relates to the depth of the response on an emotional level (e.g. does the parent give appropriate responses to the young person's signals –verbal and non-verbal for reassurance, affection or praise in a timely way?)

CARE AND NUTURE

Peer groups and managed independence are important at this age. Conflict with parents / carers may increase. Young people who are isolated through neglect or emotional abuse may struggle with other forms of neglect. The guidance below may help with the assessment of the young person having appropriate, or able to form, relationships with family and peers.

Care giver:

- Is the carer is aware of the young person's emotional signals and whether they respond?
- Is the timing of the carer's response appropriate?
- How do the actions of carer form?
- Does carer ensure positive friendships are safe and appropriate?
- Is the young person provided with social rules and boundaries?
- What significance is placed on celebrations (seasonal/religious/ birthdays) and if not acknowledged/celebrated what impact does this have on the young person?

Adolescent:

Observe the interaction and what happens when the young person seeks comfort/attention, seeks reassurance from the carer.

What is the quality of interaction – verbal and non-verbal?

Note if there is pleasure expressed by either; or an absence of response/an inability to notice the young person's signals.

DEVELOPMENT

Adolescent's engagement with school may be an indicator of neglect. The positive support from parents / carers should be seen via attendance and engagement with school meetings with regards to behavioural or absence meetings. Without support, cognitive impairment or challenging behaviour may be an indicator of neglect.

Stimulation

- Is the young person encouraged to learn and supported in their education?
- Does carer work in partnership to support good attendance and positive behaviour in school/college? Does the carer attend parent's evenings and other school/college events?
- Does the carer provide the educational establishment with emergency contact details and inform of any changes in family dynamics/circumstances?
- Does the carer work with the educational establishment to support policies and actions/decisions?
- Does the young person have access to appropriate resources?
- Is the young person encouraged and supported to engage in age appropriate sports and leisure activities?

Disapproval

How is the young person shown disapproval?

Ask what happens when the young person misbehaves?

Beware of any discrepancy between what is said and what is actually done. Speak to the young person to ascertain their views.

Does the young person have clear messages about right/wrong and what kind of behaviour brings disapproval? Ask for an example from both the caregiver and the young person.

Acceptance

How does the carer feel when they have reprimanded the young person or others have reprimanded the young person (e.g. a teacher)?

Is the young person belittled or accepted? Is their response a considered one or is there over-reaction?

Approval

Are the young person's achievements rewarded?