

HSCP & IOWSCP NEGLECT STRATEGY 2020–23



Hampshire
Safeguarding
Children
Partnership





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FOREWORD

We know that the experience of neglect in childhood can have significant and long-term consequences, affecting many areas of a child's development and their lives into adulthood. It is the most common type of abuse experienced by children in Hampshire and the Isle of Wight-as it is nationally.

The Hampshire and Isle of Wight Safeguarding Children Partnerships' (HSCP and IOWSCP) see Neglect as a key priority, and over the past five years, through the implementation of our Neglect Strategy, have raised awareness and understanding of neglect, children's needs and the need for effective intervention and support to families, across partner agencies.

We know that there is still more to do so that children have their needs met, by their parent and carers and support is provided where this is not the case.

Derek Benson
Independent Chair of HSCP and IOWSCP

Steve Crocker
Director of Children's Services
Hampshire County Council and
Isle of Wight County Council

Ellen McNicholas
Director of Quality & Nursing On behalf
of the 5 Clinical Commissioning Groups

Rachel Farrell
Chief Superintendent
Hampshire Constabulary

This revised strategy focusses on ensuring that we identify and prevent unmet needs from escalating and do so through strength based, family focused approaches, so that children in Hampshire and the Isle of Wight have the childhood they have a right to and have the opportunity to thrive.



INTRODUCTION

The multi-agency strategic partners across both Hampshire and Isle of Wight are committed to ensuring the early identification of neglect in children and young people. Under the auspices of both Local Safeguarding Children Partnerships (LSCPs), the Safeguarding Partners have prioritised neglect as a key theme for multi-agency working over the last four years.

Our ambition is to ensure that all agencies work together so that anyone who comes into contact with children and young people, is able to recognise and respond to cases where a child or young person may be at risk of emerging neglect or at risk of harm from neglect.

This strategy builds on the previous joint Hampshire and Isle of Wight strategy published in 2016. It provides an update on what work has taken place across both Partnership's since that time and provides further information on both LSCPs work to identify and address issues relating to neglect. The previous 2016 Strategy will continue to be available on the online Neglect Toolkit and can be used as a reference guide. The Hampshire and Isle of Wight Safeguarding Children Partnerships' (HSCP and IOWSCP) Neglect Strategy

2020-23 sets out our refreshed vision and key priorities and provides the framework under which ongoing multi-agency work will be undertaken.

The strategy is applicable to all professionals who work with unborn babies, children and their families across Hampshire and the Isle of Wight. It is underpinned by a strengths-based, family focused approach to partnership work. It is our intention for this strategy to build on existing good practice, as well as identify and address gaps in service delivery and provision. As such, this strategy identifies new and more effective ways of working. Effective partnership working has the greatest potential for achieving positive change for children and their families and it is only through the commitment to inclusive partnership working, across the public and voluntary sector and through listening to the voices of children, young people and families and understanding their 'lived experiences', that the objectives of this strategy will be successfully realised.

This strategy should not be considered in isolation but is intended to be supported by the full range of practitioner focussed tools available from the HSCP and IOWSCP online [Neglect Toolkit](#), as well as supporting local policies for multi-agency practice as found on the [HIPS Procedures website](#).



EQUALITY AND DIVERSITY CONSIDERATIONS

“The Children Act 1989 promotes the view that all children and their parents should be considered as individuals and that family structures, culture, religion, ethnic origins and other characteristics should be respected (Working Together 2018)”

In the development of this this strategy and the associated toolkit diversity considerations pertinent to; age, disability, gender reassignment, race, religion or belief, sex and sexual orientation have been considered. This has been achieved by retaining a clear focus on positive outcomes for children and their families via strength based individualised engagement with them.

In its development proactive steps have been taken to ensure the inclusion and engagement of practitioners, children, and their families from across our multi agency partnerships.

Within the strategy is it recognised that information is accessed in different ways. The impact of disability in the family is considered and associated tools have been developed to support accessibility and understanding for these families.





IMPACT OF THE 2016 NEGLECT STRATEGY

The Local Safeguarding Children Partnerships (LSCPs) in both Hampshire and the Isle of Wight first published their multi-agency [Neglect Strategy](#) in October 2016, followed by the supporting online professional toolkit in October 2017. The strategy outlines the collective partnership response to understanding, identifying and responding to neglect in children of all ages and circumstances. In addition to the areas commonly associated with neglect, the strategy is underpinned by promoting awareness and an informed response to the four different types of neglect originally described by Howe (2005):

- DEPRESSED / PASSIVE NEGLECT
- DISORGANISED NEGLECT
- EMOTIONAL NEGLECT
- SEVERE DEPRIVATION

NEGLECT TOOLKIT

HSCP and IOWSCP developed the Neglect Toolkit, launched in October 2017. The toolkit provides a range of resources for both practitioners and managers to use in their practice. The resources contained in the toolkit were developed by a group of multi-agency group professionals and feature:

- A neglect themed 'thresholds' chart
- Neglect indicator charts
- 'Day in the life' guides for children of different ages and needs Neglect prompts

- Case studies
- Neglect themed resource library

Young people from the Police and Crime Commissioner's Youth Commission, and members of Hampshire's Child and Adolescent Mental Health Service (CAMHS) Participation Group co-produced the 'Day in the life of a teenager' guide, providing input on a range of neglect themes that impact on adolescents.

Website analytics from October 2017 (point that the Toolkit was first launched) up until September 2020 show that the total number of unique page views (UPV) of the Neglect Toolkit landing page stood at 27,409. The most popular section of the toolkit is the Practical Tools section which evidences the use of the resources to support front line practice.

"I used the Day in a Life of a Teenager' tool when doing some direct 1:1 work with a teenager.

It was really helpful in engaging the young person in the work and using as a discussion opener. The prompts helped us both work through the various aspects of the child's life and identify what is working well and where there were concerns.

The younger sibling then asked me to go through a tool with them as 'they wanted to do one too'!"

Family Support Worker, Hampshire

TRAINING & WORKFORCE DEVELOPMENT



To support the implementation of the Neglect Strategy and Toolkit, both LSCPs developed a learning and development programme for professionals across the multi-agency partnership's. Two e-learning courses were commissioned providing an introduction to neglect. In addition the LSCPs commissioned an in-person training course that was aligned specifically with the strategy and gave professionals a more in-depth understanding of the types of neglect.

Five Level 3 Neglect training days were delivered in 2018/19 for a total of 101 attendees.

End of course evaluation forms showed that:

97% of attendees for whom we received an evaluation felt the training had met its stated learning outcomes

97% of attendees for whom we received an evaluation felt they understood how to apply what they had learnt to their day to day job

Attendees stated they had learnt how to:

"Spot signs of passive neglect more effectively"

"Be more aware of life-long effects of neglect"

A longer-term evaluation was carried out via the Workforce Development group for attendees from the three partner agencies. Responses were received from 10% of the possible cohort of attendees:

- Everyone who responded had applied their learning to their practice and had used the Neglect Strategy in their work
- Most respondents had used the online toolkit
- All respondents were now more mindful of parenting capacity and capacity for change as significant risk areas for the child

Respondents were asked to rate the online Neglect materials in terms of their impact on practitioner knowledge skills and confidence:

- The Neglect Threshold Chart, Day in my life, Neglect Prompts and resources library were most impactful

Between April 2019 and March 2020 52 practitioners undertook face-to-face neglect training through the safeguarding partnerships. Since April 2020 due to COVID-19 restrictions the training has been delivered as a webinar which has been attended by 25 practitioners.



EVALUATION

Both LSCPs undertook an evaluation of the implementation of the Neglect Strategy and Toolkit in 2019, which included a staff survey across both Partnership areas, staff focus group discussions with a range of partner agencies, a review of IOWSCP and HSCP neglect themed multi agency data and information, and a review of the usage of the online toolkit. The evaluation highlighted that:

- Over three quarters of staff who responded to the staff survey were aware of the Strategy and supporting Toolkit.
- Over half had accessed the resources available in the toolkit. Practitioners valued the range of tools available to support their practice with particular reference to the 'Day in a Life' tools, neglect prompts and conversation starters, and the neglect thresholds and indicator charts.
- Staff tended to use the toolkit resources to inform ongoing assessments, to inform referrals to MASH, as part of 1:1 direct work with children and their families, and to inform in-house training material. Professionals were able to give examples of how specific resources had been successfully used in direct work and to inform assessments.
- Practitioners requested that as part of the planned strategy updated, information be added to reflect learning from local partnership working on neglect and to highlight specific themes of neglect. To support this, professionals also asked for additional information and tools be added to the toolkit to support more targeted work with children and families.
- More work is needed to re-promote the neglect

materials and information to the broader multi-agency workforce particularly to capture new staff who had joined agencies since the original launch and promotion of the strategy and supporting tools.

"A social worker used the 'day in a life of a teenager' tool to inform an assessment of an adolescent neglect case at the initial assessment stage. The detail contained in the example led to a well informed and comprehensive assessment and considered areas that would not initially have been included. This had a direct positive impact on the child as the case escalated very quickly, resulting in the child being removed and placed in foster care. The Social Worker now reports that the child is now in a stable placement and responding really positively to care being given."

Social Work Manager, Isle of Wight

"The neglect thresholds chart was used to help the children's mum to see why we needed to make the children subject to child protection planning. We used the tools available on the website to get to an honest conversation that was evidenced based and not perceived as professional casting judgement on a parent. Sharing information and therefore concerns in this way gave her more insight into the impact of their behaviour on their child. The case improved quickly, through delivering targeted family support - particularly to the children's mum, and the risks reduced and progress maintained."

Health Visitor, Isle of Wight



WHAT IS NEGLECT?

In order to be able to recognise and address neglect it is important there is a clear and shared understanding of what neglect is. For the purpose of this strategy the definition from [Working Together to Safeguard Children 2018](#) has been used. Neglect is defined as:

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 care-givers)**
- **ensure access to appropriate medical care or treatment**

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

In simple terms, neglect is when a child is not getting the important things that they need like clean, warm clothes or enough to eat, or love. It is when a child is not being looked after properly by their parents or carers and it might include not being kept away from dangerous situations or not being taken to the doctor when they are ill or hurt. Whilst the statutory definition refers to '*persistent failure to meet needs*', neglect can be episodic or cumulative. It can also be intentional or unintentional.

In Hampshire and the Isle of Wight, we believe that in order to tackle neglect, we need to change our language and strengthen the way we work with parents who may be unable to meet the needs of their children for some, or all of the time.



TYPES OF NEGLECT

A parent/carer may not be meeting their child's needs in a number of ways, as shown below



NUTRITIONAL

When a child is provided with inadequate calories for normal growth/'to thrive' or when childhood obesity occurs due to provision of an unhealthy diet.

[>> CASE STUDY](#)



PHYSICAL

When a child's basic needs associated with food, clothing and shelter are not met, e.g. not providing appropriate clothing, food, cleanliness and living conditions.

[>> CASE STUDY](#)



SUPERVISORY

When a child fails to be provided with adequate guidance and supervision to protect them from harm e.g. leaving them with inappropriate carers or abandoning them.

[>> CASE STUDY](#)



EDUCATIONAL

When a child's is not given access to education e.g. parents/ carers fail to support their learning, respond to special needs or show an interest in the child's education.

[>> CASE STUDY](#)



EMOTIONAL

When a child doesn't get the nurture or stimulation they need to form secure and positive attachments e.g. they are ignored, humiliated or isolated.

[>> CASE STUDY](#)



MEDICAL

When a child is denied medical or dental care, to treat or prevent an illness or condition e.g. ignoring or refusing recommendations and failing to seek medical attention.

[>> CASE STUDY](#)

As highlighted the HCSP and IOWSCP's earlier 2016 Neglect Strategy provided a detailed explanation of Howe's analysis of types of neglect — this research is particularly helpful in understanding how neglect can be perceived by those working with families and effective responses to particular types of neglect. The HCSP and IOWSCP believe that Howe's work is still relevant, and it informs our response to neglect.

VULNERABLE GROUPS

The Department for Education Report (Pathways to harm, pathways to protection: a triennial analysis of serious case reviews 2011 to 2014) noted that there are particular groups of children who are more

vulnerable to experiencing neglect by virtue of their circumstances. These include, but are not limited to:

- Children with Disabilities and SEN
- Children vulnerable to exploitation both Sexual and Criminal
- Cultural Difference - BAME
- Children living with parents where there are concerns about poor mental health, domestic violence and abuse, substance misuse
- Children experiencing high levels of poverty and deprivation



WHAT WE KNOW ABOUT NEGLECT

Our own multi-agency knowledge and experience of neglect is in line with that of Turney and Taylor (2014) and Brandon et al (2008) who conclude that child neglect is a complex phenomenon with a range of possible inter-connecting ‘causes’, and this complex interplay of factors can compromise parents’ abilities to offer satisfactory care to their children.

It can be challenging to quantify neglect — as we do not know the exact prevalence of neglect nationally or locally.

Rawson *et al*, 2011 found that:

4% of under 11s

11% of 11 to 17 year olds

had experienced neglect at some point during their lives.

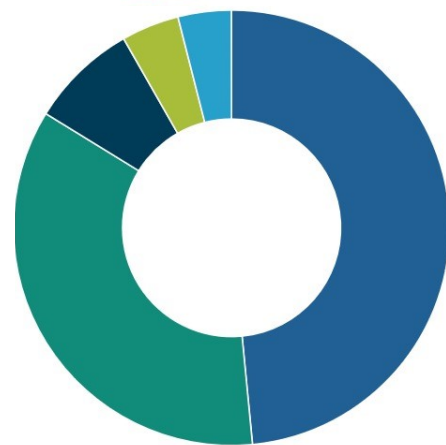
The Crime Survey for England and Wales estimated that:

1 in 100 adults aged 18-74

experienced physical neglect before the age of 16 (481 000 people) this included not being taken care of or not having enough food, shelter or clothing.

We do know that Neglect was the most common category of abuse for child protection plans in England (25, 330 children at 31 March 2019).

Neglect accounts for around half of children subject to child protection plans in England



● Neglect ● Emotional ● Physical ● Sexual ● Multiple

England, year ending March 2019

Source: Department for Education Children in Need census

WHAT IS THE LOCAL PICTURE IN HAMPSHIRE AND ON THE ISLE OF WIGHT?



Local geography and demographics vary across Hampshire and the Isle of Wight.

HAMPSHIRE

The Hampshire joint strategic needs assessment tells us that the county is a mix of urban and rural populations, with areas of affluence and areas of significant deprivation. There are six areas in Hampshire that are listed in the 20% most deprived in England, including Eastleigh, Gosport, Havant, New Forest, Rushmoor and Test Valley (Index of Multiple Deprivation, 2015).

Whilst overall Hampshire children have good health and good life chances, there do remain some significant inequalities. The main areas of concern in [Hampshire](#) are;

- **Increasing obesity and overweight in 4-5 year olds** (22.8% up from 21.1% previous year (2014/15) and more than national figure of 22.1% nationally)
- Emotional wellbeing of our children and young people - there are **higher rates of hospital admissions for self harm** (10-24 year olds) in Hampshire than nationally (590.9 per 100,000 compared to England's rate of 430.5 per 100,000, 2015/16)
- **Educational attainment in disadvantaged groups** including SEND
- Small and **decreasing proportion of young children achieving the daily physical activity levels**
- In 2019/20 **of the 40,857 referrals to CRT/MASH for Hampshire 11.2 were categorised as neglect.** However we know **this is significantly under reported** and it is likely that there were elements of neglect for other reasons. For example there were 33,076 referrals for family dysfunction
- In 2019/20 **15% of social care assessments completed in Hampshire had a presenting factor of neglect compared to 18.4% nationally** (2017/18) Neglect is rarely the only factor, with parental mental health and substance misuse often present.
- In 2019/20 **66% of children subject to child protection planning were under the category of neglect.**



ISLE OF WIGHT

The Isle of Wight (IOW) joint strategic needs assessment tells us that the IOW is ranked 80 out of 317 Local Authority areas in the 2019 Indices of deprivation, with 1 being the most deprived. There are 13 areas on the Isle of Wight that are among the most deprived 20% in the Country. This is an increase from 2010 when there were only 5 areas.

Whilst in many areas children's outcomes are improving some of the wider determinants such as poverty, childhood obesity, homelessness and levels of GCSE attainment are worse on the Isle of Wight than the national average.

The main areas of concern on the [Isle of Wight](#) are;

- In 2019/20 of the **5279 contacts to CRT/MASH for the Isle of Wight 19.3% were categorised as neglect**. However, neglect is likely to have been a characteristic of many other referrals. For example, there were 3790 (71.8%) contacts for family dysfunction
- In 2019/20 **22.5% of social care assessments completed on the Isle of Wight had a presenting factor of neglect** compared to 18.4% nationally (2017/18). Neglect is rarely the only factor, with parental mental health and substance misuse often present.
- In 2019/20 **74.5% of children subject to child protection planning were under the category of neglect**.
- The **number of children in low income families (under 16), at 3,985 - 18.8%** compared with 17% nationally.
- Rate of **children looked after 98 per 10,000**, compared to England average of 65 per 10,000
- Alcohol misuse by our young people-with a **rate of 80 per 100,000 hospital admissions for alcohol specific conditions for under 18 year olds** compared to England average of 31.6 per 100 000.
- Emotional wellbeing of our children and young people - there are **higher rates of hospital admissions for mental health conditions (0-17 year olds) on the Isle of Wight than nationally (140.7 per 100,000 compared to England's rate of 88.3 per 100,000)**

Local Authority Children’s Services in England have a duty to notify the Child Safeguarding Practice Review Panel if a child dies or is seriously harmed and abuse is known or suspected; or a looked after child dies. Where an incident involves harm to more than one child, data is only collected about the first child identified on the incident form.

There were 30 serious incident notifications for serious harm involving neglect by a parent or carer in England in the year ending March 2018. This is an increase from 23 incidents in the previous year and is the highest number in the last five years. Neglect accounted for

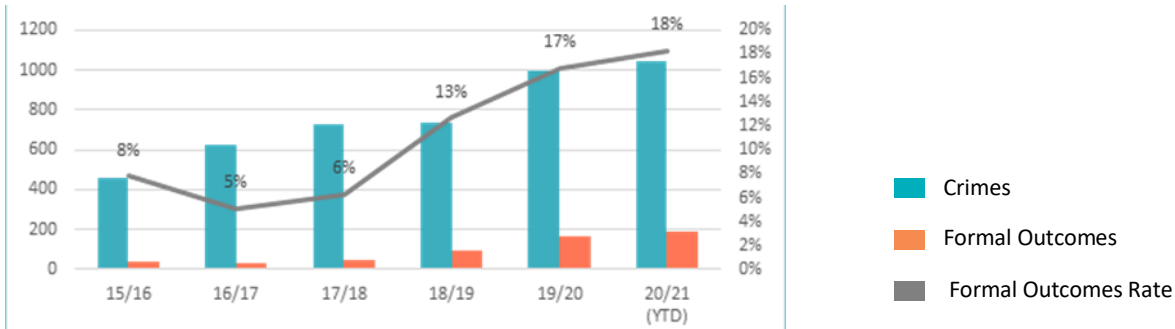
nine serious incident notifications for child death in the year ending March 2019

Police data shows they are recording more crimes of Neglect. This could be in part due to better identification by Police and partners.

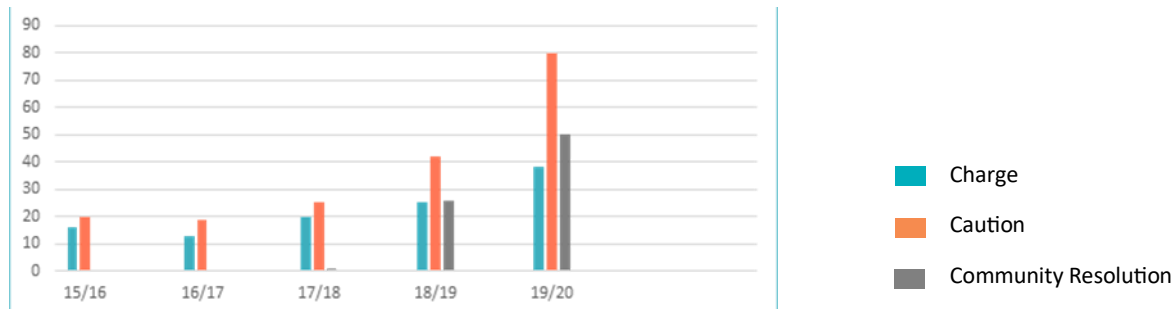
Graph 1 includes projected figures for 2020-21 in the light of the COVID Pandemic. Actual figures may be higher or lower.

Formal Outcomes is either where a person is charged, given a conditional caution, or given a community resolution.

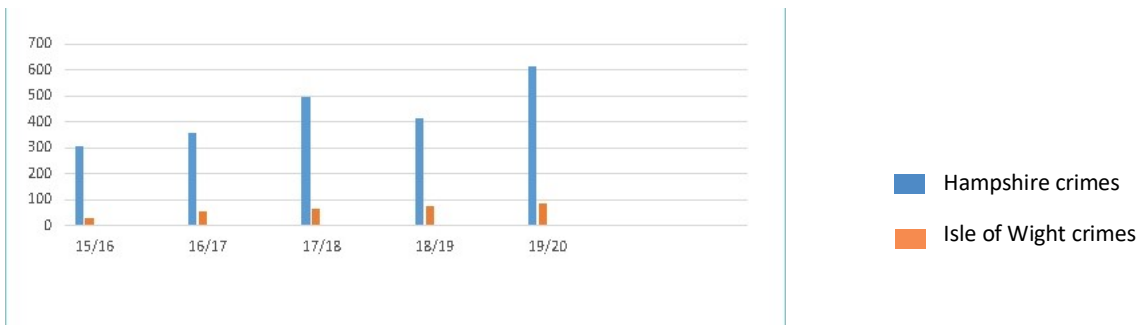
1. Hampshire Constabulary - Crimes & Formal Outcomes (Projections for 2020/21)



2. Hampshire Constabulary - Formal Outcome Types for Neglect



3. Hampshire Constabulary - Recorded Neglect by LSCP





STRATEGY & OBJECTIVES

The strategic aim of the HSCP and IOWSCP Neglect Strategy is to prevent and reduce the impact of neglect and to ensure the safety and wellbeing of children and young people in Hampshire and the Isle of Wight.

In order to fulfil this aim, it is imperative that neglect is recognised early, prevented and that all agencies involved in the care and support of children and families in Hampshire and the Isle of Wight work in

partnership to effectively, collectively and consistently respond to all children considered to be at risk of neglect.

To support the implementation of this strategy and to ensure that ‘neglect’ is widely understood and responded to in joint working arrangements, the HSCP and IOWSCP undertakes to deliver the following objectives;

- 1 To further enhance our strategic commitment to the understanding of neglect, children’s needs and the provision of intervention and support
- 2 Empower families and communities to meet their child’s needs, by working in partnership to overcome factors which prevent parents and carers from meeting the needs of their children
- 3 To ensure there is a robust system and services to assess and address neglect so that children are safe and cared for. This includes ensuring that assessments and work with families is timely, effective, family focused, and strength based.
- 4 All professionals working with families and children will do so in a strength-based way that considers both risk and protective factors.
- 5 Leadership across all partner agencies will drive good practice and improvement in addressing neglect.

HOW WILL WE ACHIEVE OUR OBJECTIVES?

The HSCP and IOWSCP have developed an [action plan](#), which provides details on how these objectives will be achieved and what will be different for children now and in the longer term. This plan will evolve over the lifetime of the strategy.

GOVERNANCE

The HSCP and IOWSCP own this strategy and will oversee the progress of the action plan through an annual report to the respective Boards. We will assure ourselves of the quality of our multi-agency response to neglect across services through multi-agency audits, including consultation with children, young people and families and professionals about what has helped and made the most difference to them and how supported they feel.



ADDITIONAL RESOURCES

This strategy is supported by the HSCP and IOWSCP online [Neglect Toolkit](#). The toolkit provides a range of resources aimed at frontline practitioners from all agencies across the two Partnerships to support both direct work with children and families and to inform assessments.

In addition, both LSCPs have a suite of subject specific procedures available via the Hampshire, Isle of Wight, Portsmouth and Southampton (HIPS) Procedures website, including:

- [Child and Family Engagement Guidance](#) (was not brought to medical appointments)
- [Abuse of Disabled Children](#)
- [Fabricated and Induced Illness by Carers](#)
- [Safe Sleep for Babies](#) (including information on the criminal offence of overlaying)
- [Children who are exploited](#)

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Hampshire Hospitals Foundation Trust
Hampshire and Isle of Wight Partnership of Clinical Commissioning Groups
West Hampshire Clinical Commissioning Group (CCG) on behalf of the 5 CCGs
Southern Health
Sussex Partnership NHS Foundation Trust
Voluntary and Community organisations across Hampshire and the Isle of Wight

APPENDIX : CASE STUDIES



MEDICAL NEGLECT

Joe is 9 years old and subject to a Child in Need plan under section 17 Children Act 1989. There are significant concerns about the management of Joe's diabetes. Joe's mother has a history of alcohol misuse and has consistently missed Joe's health appointments and has been unable to take responsibility or adhere to managing Joe's diabetes regime and insulin management. There have been frequent reports of missing episodes for Joe. Joe was recently admitted to hospital when he overdosed on insulin when trying to manage his insulin. School have raised concerns about Joe's low mood. Health professionals have concerns about the risks related to type 1 diabetes and the serious long-term health implications for Joe if there is no improvement in his diabetes management.

EDUCATIONAL NEGLECT

Jakub is 12 years old and lives with his mother. Jakub is subject to a Child Protection Plan due to his mother's long-term chronic alcohol misuse. Jakub has poor school attendance, and this has impacted on him socially, emotionally and educationally. There is professional concern for Jakub's confidence and self-esteem. Attendance meetings at the school have not affected positive change.

PHYSICAL NEGLECT

Molly and Sam live with their dad. When someone came to undertake repairs at their house they found that there was dog and cat faeces around the house, and the cat litter tray was overflowing, they saw food rotting in the kitchen and broken furniture and toys lying around. They also saw food rotting in the kitchen. The children's school were concerned that they turned up late and were often dirty, unkempt and often hungry. The children seemed tired and told staff that they did not have regular bed times.



NUTRITIONAL NEGLECT

Will is nine years old and has three brothers. All the boys are overweight and the diet provided by their parents is poor. They are not supported to undertake exercise. Their mum has had mental health problems and dad does not agree with what the medical professionals are advising and therefore the family are not engaging in the support that is on offer. The children are increasingly at risk of poor health in the longer term due to the level of obesity. The school are aware that the children are sometimes bullied by other children and are trying to address this.

SUPERVISORY NEGLECT

Brianna is 13 years old and lives with her dad, he has some health problems and Brianna has little supervision at home, she feels that her dad does not really care where she and she can come home anytime she wants. She regularly stays out late, hanging out with older teenagers. The Police arrested her for shop lifting recently and there are concerns that she maybe being exploited, as she has recently changed in her appearance, with new clothes/make up. There is a lack of wider family or informal networks of support.

EMOTIONAL NEGLECT

Zerya is 10 years old and Zerya's mum experiences depression. Professionals working with the family have noted that Zerya's mother is often negative towards Zerya and has a low warmth and highly critical parenting style which inevitably impacts on Zerya's self-esteem. Zerya's mum sometimes makes comments about Zerya in front of him, such as wishing he was in care, which have a significant impact on Zerya's wellbeing. School have raised significant concerns for Zerya's emotional well-being, lack of social engagement with peers and poor educational attainment attributed to mother's attitude towards Zerya.

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