

Agency Report for Child Protection Conference

Agency Name	Perinatal Mental Health
Professional's Name	
Role/Job Title	
Address	
Phone Number	
Email address	

Date of Report	
Date of Conference	

Details of Children

Children's Name	Gender	DOB	Is your agency working with this child?
Baby boy	M		Yes

Details of Parents, Carers, Significant Family Members, other Household Members

Name	DOB	Relationship to children	Is your agency working with this family member?
Mum		Mother	Yes
Dad		Father	No

Overview of your agency's involvement with the child/family: Please include details such as type of service, length of involvement to date, desired outcomes, progress to date, and any other relevant information.

Mum was referred to the Perinatal Team in December 2020, she was in her last trimester of pregnancy and struggling with low mood, self harm and suicidal thoughts.



Since then Mum has presented with periods of low mood and crisis, reduced enjoyment, reduced motivation and suicidal ideation, usually in response to external stressors (poor housing, social isolation, difficult relationship with ex-partner and extended family).

Since the last conference there has been less episodes of crisis and no further input from Home Treatment Team. Mum reports taking her antidepressant daily and feels she has a good response from this. Mum has been proactive in contacting me if she is running out of medication.

Mum has attended the Children's Centre with support from the Perinatal Team and has expressed her intention to attend again in future. She has also expressed an interest in other mother and baby groups. We have discussed the benefits of mum developing a structure to her week and spending more time out of her accommodation as she identifies the environment as having a negative impact on her mental health.

Mum was due to commence Psychology however, given the frequency with which she was experiencing mental health crises it was felt that she would benefit from mentalisation-based therapy (MBT) to help with emotional regulation and interpersonal/ relationship difficulties prior to this. Mum has engaged well in discussions/ psychoeducation work focusing on her emotionally unstable personality disorder (EUPD) diagnosis.

Mum and dad have also been offered input from Systemic Family Therapy to focus on their relationship and communication and being thoughtful about Baby's experiences.

When was the child(ren)/family member last seen by your agency?

[Anonymised]

Please comment on attendance/engagement with your agency: If possible please provide details of appointments offered, un/attended, cancelled etc

Slightly variable, engagement with MBT has been inconsistent. Mum has forgotten or cancelled some Perinatal sessions (due to illness) but has generally sustained engagement and been contactable. Mum will need to engage consistently with MBT and Systemic Family Therapy or risks being discharged from these services.



What is going well for this child/family? Please provide information of current strengths, protective factors, features of family life and parenting that have a positive effect on the child(ren)'s lives, actions taken by the family/parents which have kept the child(ren) safe previously, how harm has been avoided in the past, progress and development against agreed targets etc

Engaging with Perinatal Services.
Help seeking especially when in crisis.
Keen to engage in talking therapies, we have had several discussions about working on emotional regulation and stress responses, to reduce how quickly Mum's emotions escalate and how this can lead to impulsive actions and conflict. Appears to have supportive relationship with [anonymised] and [anonymised]. Mum has attended the Children's Centre.

What are you worried about? Please comment on your current concerns for the child(ren) and family, include issues that you think pose risk to the child(ren) in the near and long term future, what do you believe to be the likely outcome for the child(ren) if their current situation continues?

The ability of baby's parents to think about his experience of their arguments/ tension in the relationship.
Prior accounts of physical violence perpetrated by both parents and furthermore that when police have attended, it seems that Mum's voice/ account events hasn't been heard.
That Baby would benefit from more opportunities to play and interact with his peers e.g. at play groups/ children's centres.
Limited social network. Mum's accommodation compounds her isolation due to not being allowed visitors, which may be contributing to Mum frequently presenting at various family members homes for support, which they aren't always able to provide.
Mum's mental health and emotional regulation, her mood can deteriorate (and improve) quite quickly in response to stressors.

Historical concerns and past harm? Please provide information about previous concerns, factors from a parent's own childhood/previous experience which could increase risk, past behaviour or actions that have caused harm, details of incidences, severity and impact.



Mum has a history of depression and anxiety, history of self harm and suicidal ideation. Limited information available about mum's childhood but her relationship with her family is often strained.

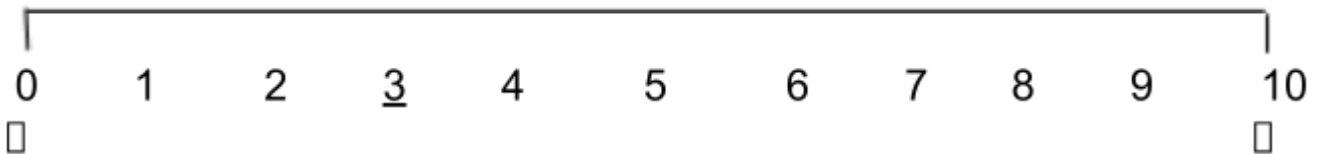
Wider issues and complicating factors? Please describe the actions/behaviours around the family that make the problems harder to deal with, incorporate any areas that are unclear or which the family do not accept which increase risk, and external factors which make the situation more difficult to resolve e.g. housing, community, employment.

Housing – accommodation is restrictive and contributing to social isolation. Limited social network.

Having thought about what you are worried about for this child(ren) and family please rate (highlight) how worried you are about the child(ren) today?

0 = I am very worried about this child and feel they have or are at risk of suffering significant harm if things do not change

10 = I have no concerns for the child(ren) at this time and feel they are safe



What would reduce your concerns? Describe clearly what you would need to see to be satisfied that the child(ren) are safe enough to not need additional support or protection. What would life look like for this family if the children were safe and well

Therapeutic input from Systemic Family Therapist for both dad and mum together to help them communicate and think about Baby's experiences and needs.
For mum and dad to take baby regularly to Children's Centre sessions / play sessions.
Mum to continue to engage with mental health services



What areas of risk or concern can your agency help the parents/carers to resolve?
 What contribution can your agency make to the child(ren)'s plan, what actions need to be taken to ensure the child(ren) are safe and well, and by who?

Ongoing Perinatal nurse input
 Family Systemic Therapy for input for mum and dad.
 Nursery nurse input to encourage Mum to attend Children's Centre sessions with Baby- Dad would be welcome to join these sessions too.

Has this report been shared with the parent/carers?	Yes
Date it was shared	
Views of parents/carers?	

Has this report been shared with the child(ren)?	Y/N
Date it was shared	
Views of the child(ren)?	

Signature of person completing this report	<i>Perinatal Nurse</i>
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