Spotlight on Child Neglect
Presentations
15th March 2016
Cardiff

Sbotolau ar Esgeulustod
Cyflwyniadau
15fed o Fawrth 2016
Caerdydd

#tacklingneglect
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Breaking the generational cycle of crime and neglect
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Janine Roderick- Arweinydd Polisi dros Iechyd Cyhoeddus a Phlismona yng Nghymru
Public Health and Policing: Breaking the generational cycle of crime and neglect

Janine Roderick, Policy Lead Public Health and Policing in Wales
Definition:

Neglect means a failure to meet a person's basic physical, emotional, social or psychological needs, which is likely to result in an impairment of the person's well-being (for example, an impairment of the person's health or, in the case of a child, an impairment of the child's development).

Social Services and Well-being (Wales) Act 2014
It can be contagious.............
Adverse Childhood Experiences (ACEs) and their impact on health-harming behaviours in the Welsh adult population

Bellis et al, 2015
How many adults in Wales have been exposed to each ACE?

**CHILD MALTREATMENT**
- Verbal abuse: 23%
- Physical abuse: 17%
- Sexual abuse: 10%

**CHILDHOOD HOUSEHOLD INCLUDED**
- Parental separation: 20%
- Domestic violence: 16%
- Mental illness: 14%
- Alcohol abuse: 14%
- Drug use: 5%
- Incarceration: 5%
For every 100 adults in Wales 47 have suffered at least one ACE during their childhood and 14 have suffered 4 or more.

- 0 ACEs: 53%
- 1 ACE: 20%
- 2-3 ACEs: 13%
- 4+ ACEs: 14%

Figures based on population adjusted prevalence in adults aged 18-69 years in Wales.
ACEs increase individuals’ risk of developing health harming behaviour

Compared with people with no ACEs, those with 4+ ACEs are:

- 4 times more likely to be a high-risk drinker
- 6 times more likely to have had or caused unintended teenage pregnancy
- 6 times more likely to smoke e-cigarettes or tobacco
- 6 times more likely to have had sex under the age of 16 years
- 11 times more likely to have smoked cannabis
- 14 times more likely to have been a victim of violence over the last 12 months
- 15 times more likely to have committed violence against another person in the last 12 months
- 16 times more likely to have used crack cocaine or heroin
- 20 times more likely to have been incarcerated at any point in their lifetime
Preventing ACEs in future generations could reduce levels of:

- Heroin/crack cocaine use (lifetime) by 66%
- Incarceration (lifetime) by 65%
- Violence perpetration (past year) by 60%
- Violence victimisation (past year) by 57%
- Cannabis use (lifetime) by 42%
- Unintended teen pregnancy by 41%
- High-risk drinking (current) by 35%
- Early sex (before age 16) by 31%
- Smoking tobacco or e-cigarettes (current) by 24%
- Poor diet (current; <2 fruit & veg portions daily) by 16%
Brain Development - The Critical Years

- First 2 years - baby’s brain grows from 25% to 80% of adult size
- Development continues in childhood learning empathy, trust and community

Data source: C. Nelson (2000); Graph courtesy of the Center on the Developing Child at Harvard University
The Impact of ACEs on Brain Development

Chronic Stress from ACEs over-develop ‘life-preserving’ part of the brain.
Always prepared to fight or flee

Anxious

Disengaged

Poor learner
Adverse Childhood Experiences (ACEs) - The Life Course

**Developed from Felitti et al. 1998**

- **ACEs Adverse Childhood Experiences**
- **Disrupted Nervous, Hormonal and Immune Development**
- **Social, Emotional and Learning Problems**
- **Adopt Health Harming Behaviours and Crime**
- **Non Communicable Disease, Disability, Social Problems, Low Productivity**
- **Early Death**
Public Health and Policing

‘We will identify common problems and understand the challenges we face and will progress the delivery of joint priorities from the wider perspective of both public health and criminal justice, with an emphasis on prevention and early intervention’.
Words into Action

5 Principles:
• Data sharing, analysis and evaluation
• Partnership Working
• Prevention and Early Intervention
• Environmental and Cultural Influences
• Supporting People and Communities

Work Streams:
• Ensuring police are part of the solution to early intervention and prevention
• Putting Health and Wellbeing in Police and Criminal Justice Policy, in line with Wellbeing Future Generations Act
• Preventing root causes of crime using approaches based on evidence
Police Innovation Fund Bid – The Issue

Early Intervention and Prevention: breaking the generational cycle of crime

In one area of South Wales between 4th June 2015 and 18th November 2015 (24 weeks) 1,484 Public Protection Notifications (PPNs) were received by social services from the police.

89% (1,317) PPNs logged and closed

11% (167) PPNs progressed

- Verbal Abuse
- Physical Abuse
- Separation
- Domestic Violence
- Alcohol Abuse
- Drug Use
- Incarceration
- Sexual Abuse
- Mental Health

Increase risk, adversity and harm
Police Innovation Fund Bid – The Proposal
Early Intervention and Prevention: breaking the generational cycle of crime

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<th>Understanding the Issue more holistically</th>
<th>Intervening earlier in a more efficient and effective way based on the understanding</th>
<th>Preventing the root causes of crime using evidence based approaches</th>
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<td>• Systems mapping</td>
<td>• Training for neighbourhood police and PCSOs on identifying and responding to early indicators of harm and adversity.</td>
<td>• Identify, implement and evaluate interventions which aim to prevent ACEs and build resilience across the life course</td>
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<td>• Develop early indicator data set</td>
<td>• Work with colleagues in housing health and education to build a common approach and develop ICT application which supports professional judgement</td>
<td>• Engage and influence partners to adopt the approach at an individual, family and community level</td>
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<td>• Analysis to inform targeted approaches / interventions</td>
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ACE PREVENTION IS CRIME PREVENTION
Opportunities for action

• Future Generations Act
• Social Care and Wellbeing Act
• Violence Against Women, DA and SV Act
• Tackling Poverty Programmes
• Together 4 Children and Young People
• UN Convention Rights of the Child
• United in Improving Health
It Starts With You!

ACE informed Professionals, Politicians and Public

Address the underlying causes not the symptoms

Identify the risks and harm and promote protective factors

Protective factors

ACEs
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Police response to child neglect
DCC Manners

Ymateb yr heddlu i esgeuluso plant
DCC Manners
Child Neglect
National Policing Context

DCC Karen Manners
Four Pillars of Child Protection

- Online Child Sexual Abuse
- Child Abuse
- Child Sexual Exploitation
- Child Neglect
Child Neglect
Be Professionally Curious!

What’s key
What’s going on?
Recognising & Responding to Vulnerability

We are too reactive, which means we do not assess the bigger picture.

We are preoccupied with the wrong question – “What”. We don’t ask the right question enough - “Why”.

We do not ask “am I happy to leave the level of risk behind that door when I leave”

People feel disempowered for fear of punishment and negative fallout from challenging or using professional curiosity.

We don’t find it easy to support or recognise the staff who challenge/reflect.
Recognising & Responding to Vulnerability

CHANGE PROGRAMME

- Communications strategy – including posters
- Workshops
- Knowledge - level 1 for all; bespoke CPD material
- Independent evaluation - Worcester University
NSPCC’s neglect journey: new hopes and new evidence
Dr Ruth Gardner, NSPCC

Siwrnai esgeuluso plant yr NSPCC: gobeithion newydd a thystiolaeth newydd
Dr Ruth Gardner, NSPCC
Presentation Outline

• Why is child neglect so challenging?

• Neglect and child development- its impact

• What we have achieved together

• What we have learnt; new evidence, new hopes

• Getting there sooner – a multi layered strategy
Defining child neglect

Social Services and Wellbeing Wales Act 2014
Section 197 (1)

“Neglect means the failure to meet a person’s basic physical, emotional, social or psychological needs, likely to result in the impairment of their health, wellbeing or development“.
What children tell us: new Child Line data

• **Lack of food**, often linked to **parental alcohol or substance misuse or mental health problems**, is the top issue that children mention.

• Parents’ misuse of alcohol or drugs is also a growing concern reflected in adults’ calls to the NSPCC helpline. In 2014-15, we saw a **36 per cent increase on the previous year**.

• A third of children talk about being **left home alone frequently**.

• Many have **problems at school** as a result of neglect – they are hungry all day, often they are bullied, and they lack any parental support with their education.

• They feel abandoned. Worryingly in 2014-15, there were just **1016** ChildLine counselling sessions with children and young people about neglect – **a 15 per cent decrease** compared to the previous year.
Why is neglect so challenging?

what professionals tell us

the nature of harm from neglect

the impact on the individual and on society
Community Care professionals’ survey N = 250

Less than 1 in 10 were confident of timely action on neglect (and EA) -
While over 7 in 10 were confident about PA, SA
77% “tendency for parents’ needs to take precedence over the child’s”
72% “insufficient services/resources/tools”
66% “insufficient attention to parents’ capacity to change”
64% “not sure that enough neglect cases get to court due to the burden of evidence”
What professionals want

A better understanding of the cumulative nature of neglect (by judges, GALs, SWs etc)
To allow time for change – but the child’s time
Less pressure to downgrade or close neglect cases
Support to collate and analyse impact of neglect
More in-depth training
Address the “start again” messages
What we would hope to find

Patrick Ayre, University of Bedfordshire
What we find

- Sexual Abuse
- Physical Abuse
- Neglect
- Neglect
- Neglect
- Neglect
Threshold of Intervention

Neglect is often CUMULATIVE HARM
EG Failures to attend (FTA)

Well

FTA
Deterioration
FTA
FTA
FTA
The Developmental Trajectory - with acknowledgments to Prof Jane Barlow

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<th>Intellectual Development</th>
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<td>Alertness/curiosity</td>
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<td>Social Relationships</td>
<td>Reasoning/problem solving</td>
<td>Goal-directed behaviour</td>
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<td><strong>Adolescence</strong></td>
<td>Supportive social network</td>
<td>Learning ability/achievement</td>
<td>Social responsibility</td>
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Impact on the individual

Difficulties with

- behaviour
- relationships with family and peers
- emotions and self-perception
- school performance

- may be aggressive and hostile
- may be unpopular but lack insight
- may have poor self-esteem and low expectations of self and others
- may give up easily
- may struggle with instructions
- may be lonely

www.core-info@cardiff.ac.uk
Impact on the family

**Difficulties with**

- healthy, safe routines
- mentalisation and empathy
- proximity and intimacy
- boundaries
- negotiating
- handling emotions
- planning together

- may be passive or collusive
- may over-react, hit out
- may not react to other’s pain
- may be addicted
- depressed or suicidal
Impact on society

The financial cost

The EIF estimates that nearly **£1.15 billion per year** is spent in Wales on ‘late intervention’ –

‘benefits and services that are required when children and young people experience severe difficulties in life’

- Crime and anti-social behaviour
- School absence and exclusion
- Child injuries and mental health problems
- Youth substance misuse
- Youth economic inactivity
- Child protection and safeguarding
Cost to our future

The impact of child neglect makes it hard for children to grow up to be confident and productive members of society. Apart from the health and welfare costs of neglect, we risk losing their contribution and the potential benefits that they might provide.
What we have achieved by working together
Child development: relationships matter

• Serve and return interactions shape brain architecture through infancy, childhood and adolescence so their absence is a serious threat to a child’s development and future well-being into adulthood

• Building the capabilities of ALL adult caregivers can help strengthen the environment of caring relationships essential to children’s lifelong learning, health, and behaviour

We need a combination of strong family, community and professional networks for children’s optimal resilience
Our vision

A concerted shift to prevention where everyone – children, parents, communities, universal services and local government – works together to help children thrive, preventing neglect before it happens and nipping early problems in the bud.
launched Thriving Families in five sites
this is a new programme of evidence-based approaches designed to get the right services to families early on and help forestall neglect.
Cardiff and Swansea are both Thriving Families sites.

we have published new evaluation findings on assessments and change services that we have implemented to identify and address child neglect in a timely way.
New findings

Graded Care Profile

N. Carolina Family Assessment Scale

Safe Care

Triple P Standard & Pathways

Video Interaction Guidance
NSPCC: Evaluation of the Graded Care Profile

GCP sets out to provide a succinct framework for making an assessment of the care of an individual child and is

• based on reliable standardised evidence

• Baseline measurement and comparison over time
• Practice tool, giving objective measure of the quality of care in 4 domains
• Physical Care, Safety, Love & Esteem

• Considers strengths and areas for change

• Judgement about care and indications on capacity
GCP: What have we learnt?

GCP can help professionals identify risks and potential harm more effectively.

Practitioners said that the tool promotes a child-centred approach and helps make neglect more visible.

GCP supports practitioners to develop a constructive working relationship with the family.

It does this by identifying parenting strengths as well as weaknesses and by helping parents to understand the practitioner's concerns.

Practitioners rated the usefulness of GCP highly. On a 5 point scale it was rated as 4 or 5 in over two thirds of cases.

“GCP really does focus on what it’s like to be a child in that house. It’s actually saying this is what needs to happen now in order for these negative things to stop happening.”
North Carolina Family Assessment Scale-G (NCFAS-G): What have we learnt?

Social workers felt the Evidence Based Decisions review helped them make the right decisions for families.

It gave them the confidence they needed to fight the corner for neglected children.

Some social workers said NCFAS-G provided more concrete evidence than assessment tools they commonly used, such as the Common Assessment Framework (CAF) triangle.
NSPCC Evidence Based Decisions Assessment with NCFAS – G

- Environment
- Parental capabilities
- Family interactions
- Family safety
- Child well-being
- Social & community life
- Self-sufficiency
- Family health
Safe Care®: what have we learnt?

Our findings support existing evidence that SafeCare can prevent neglect

Children were safer from neglect after their parents received SafeCare. Of the families where neglect was a concern prior to SafeCare, two thirds showed improvement to a point where no further intervention was considered necessary.

Parents likes receiving the service in their home and said it gave them a 'safe place' to practise their parenting skills.

Parents said the positive feedback they received helped build their confidence in their parenting abilities.

SafeCare was valued by referrers – 91% of referrers who responded to the survey said they would refer similar families to SafeCare in the future.
Video Interaction Guidance & Triple P Pathways: What have we learnt?

Children’s emotional and behavioural difficulties were seen to be measurably reduced after they and their parents participated in VIG or Triple P.

Parents felt their parenting had improved – specifically their understanding and responsiveness.

Partnership between parent and practitioner is vital.

Parents valued working with a practitioner who is flexible with new ideas and suggestions and non-judgemental in their approach.
Getting there sooner with neglect
What the research tells us

Neglect can be life-threatening and needs to be treated with as much urgency as other categories of maltreatment.

The possibility that in a small number of cases neglect will be fatal, or cause grave harm, should be part of the practitioner’s mind-set.

The key aim for the practitioner working with the neglect is to ensure a healthy living environment and healthy relationships for children.

Brandon, M. Bailey, S. Belderson, P. & Larsson, B. Neglect and Serious Case Reviews. UEA & NSPCC 2013
What the research tells us

There are services that work to tackle neglect
We have developed, implemented and tested services that help tackle neglect, finding out more about what works for which children and families and why, and about the challenges of implementing new services.

We can design better local systems to pick up early signs
We have also developed, implemented and tested ways of assessing neglect to help practitioners make the right decisions at the right time.

We’ve looked too at how communities, universal services and local government can play a role in preventing neglect.

Relationships make the difference
To prevent and tackle neglect, we need to support and nurture relationships.

The most important relationship is between the child and their parents. Other relationships like those between practitioners and parents, and between local services, are also key.
A multi layered strategy on neglect

- Commitment to break the cycle of poor outcomes
- Reviewing formal guidance to address neglect clearly
- A focus on prevention and early intervention EG First Thousand Days Plan
- An inclusive approach EG community groups, services for adults - mutual respect
- Building on evidence and and practice wisdom
A multi layered strategy on neglect

• Neglect-focussed, tested assessments and interventions

• Good quality information for children, parents and public, with identified contact points

• Locate responsibility for achieving change in all relevant services - including emergency, community and adult services

• Multi agency training on signs, professional curiosity, communicating, clear recording and joint working
To end cruelty to children

NSPCC Strategy 2016 to 2021

- Prevent abuse in families facing adversity
- Prevent sexual abuse
- Make children safe from abuse online
- Help abused children get back on track
- Help children speak out and adults take actions
Useful references and links

https://www.nspcc.org.uk/tacklingneglect
Useful references and links

- Core Info Systematic Reviews on the effects of neglect and emotional abuse
  - http://www.core-info.cardiff.ac.uk

http://www.nspcc.firststop

http://www.nspcc.org.uk/prevent

Thank You
Sally Holland
Childrens Commissioner for Wales

My Vision:
A Wales where all children and young people have an equal chance to be the best that they can be.

Sally Holland
Comisiynydd Plant Cymru
Comisiynydd Plant Cymru
Children’s Commissioner for Wales

NSPCC Ffocws ar esgeuluso plant 15 Mawrth 2016
NSPCC Spotlight on child neglect 15 March 2016

Sally Holland
Comisiynydd Plant Cymru
Children’s Commissioner for Wales
My Vision:

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Fy ngweledigaeth:

Cymru lle mae gan bob plentyn a pherson ifanc cyfle cyfartal i gyrraedd ei botensial llawn.
Hawl i fod yn hapus, yn iachus ac yn ddiogel

- **Erthygl 6** – Hawl i fywyd ac i dyfu i fod yn iach.

- **Erthygl 19** – Hawl i ddim cael eich niweidio ac i dderbyn gofal a chael eich cadw’n ddiogel.

- **Erthygl 26** – Hawl i gefnogaeth ariannol.

- **Erthygl 28** – Hawl i ddysgu a mynd i’r ysgol.

Right to be happy, healthy and safe

- **Article 6** - Right to life and to grow up to be healthy.

- **Article 19** - Right not be harmed and to be looked after and kept safe.

- **Article 26** – Right to financial support.

- **Article 28** - Right to learn and go to school.
Comisiynydd Plant Cymru
Children’s Commissioner for Wales

Beth Nesa? / What Next?
Esgeulustod a Thlodi
Neglect and Poverty
A Child Centred Response to Neglect

Ymateb i esgeuluso sy’n blaenoriaethu plant
Comisiynydd Plant Cymru
Children’s Commissioner for Wales

Diolch yn fawr
Thank you

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Prosiect Esgeulustod Cymru gan Lywodraeth Cymru
Vivienne Laing, NSPCC Cymru/Wales
a Dani Cope, Ymgyrchoedd Gweithredu dros Blant
Welsh Neglect Project

The findings from the Welsh Government commissioned Welsh Neglect Project

March 2016
Project Intent

“This project will research the current evidence base and existing practice in Wales, and deliver recommendations and resources to improve multi-agency responses and services to address child neglect across the spectrum of need”
First year 2013/4

• Agreed contract with Welsh Government
• External Advisory group established
• Evidence gathering
  – Commissioned Cardiff University research: ‘An investigation into current responses to child neglect in Wales’ S. Holland, A. Crowley, L. Noaks (2013)
  – Practitioner seminars in North and South Wales
Findings from Cardiff University Research

• All LSCBs were working to embed a more systematic approach to identifying and addressing neglect

• Graded Care Profile was the tool most commonly used in Wales (12 out of 22 local authorities reported using amended versions of the tool)

• In addition to GCP-based tools a total of 9 other neglect assessment tools were reported as being used across Welsh authorities

• Thirteen of the Welsh local authority areas reported that they had a neglect protocol in place
Evidence from Year 1

Key issues raised by the evidence

• Need: not enough is known about the scale of neglect in Wales
• Awareness: increasing awareness of neglect, particularly in universal services, is a priority
• Assessment: front-line workers find it difficult to evidence neglect - when does poor parenting become neglectful? This impedes early decision making
• Response: front-line workers perceive limited services to respond effectively to neglect and a lack of consistency and fragmentation of services that are in each area.
• Review: impact is difficult to assess because we have very limited information on outcomes for children and families
Key messages from Year 1

• To tackle neglect as early as possible and ensure our efforts are joined-up and coherent we require a neglect strategy, led by the Welsh Government to coordinate and harness efforts nationally and locally.

• Practitioners need training, evidence based tools and services to support them to identify and respond more effectively to neglected children.

• To reach neglected children earlier we must increase capacity within universal services to identify neglect and support parents / carers. This includes universal health services, education and family support services.
6 Project workstreams 2014/5

- Local area population needs assessments
- Multi-agency neglect assessment tools for individual children and families
- Multi-agency neglect protocol
- Research into the role of education services in tackling neglect
- Training arrangements for multi-agency staff
- Governance
Local area population needs assessments

**Aim:** Inform guidance on population needs assessments that will sit beneath the Social Services and Wellbeing (Wales) Act to support local areas to capture the scale of child neglect.

**Method:** Interviews and focus groups with 6SCBs/19LAs/5LHBs.

**Output:** Framework and tool to identify areas where the combination of risk factors lead to a heightened risk of child neglect.
Multi-agency neglect assessment tools for individual children and families

Method:
Review of the evidence that underpins the tools used to assess child neglect in Wales

Advisory Group and partners agreed:
• To recommend one tool to assess neglect- the evidence base points to using one consistent version of Graded Care Profile
• This needs to be accompanied by a screening tool for use by multi-agency practitioners
Multi-agency neglect protocol

**Aim:** To develop a model neglect protocol for SCBs.

**Method:** Engagement with 6 SCBs, yp and parents. Followed by developments days

**Output:** Framework for a model protocol and outline plan for implementation
Research into the role of education services in tackling neglect

**Aim:** Research best practice in supporting neglected children in schools and early years settings

**Method:** Online survey (262 practitioners), focus groups (101 practitioners) and a yp focus group

**Findings:** Practitioners perceived that they had responsibility for identifying and providing early support and would monitor a child where there were concerns.

Lots of promising practice

Need clarity about their role to provide early support, need training and clear pathways to help them identify and provide early support
Training arrangements for multi-agency staff

Aim: Mapping exercise of current neglect training in Wales to inform future training

Method: Semi structured interview with leads in SCBs and LHBs

Findings: Priority, degree and frequency varied between SCBs and concern about future funding
Greater degree of consistency in LHBs

Conclusion: Additional resource would be needed
Next Steps

• Preventing and addressing child neglect will be embedded in the work programme of Improving Outcomes for Children Strategic Steering Group

• We are pleased to announce the publication of the ‘Summary Report of Year 2 of the Welsh Neglect Project’ today
IOC SSG’s outcomes will include:

• Needs assessment
• Evidence based tools for professionals
• Governance arrangements to support local and regional responses
• Leadership
• Early and effective support through intervention and prevention programmes
• Confident and competent workforce
• Training
Contact details

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