

Critical Events

Chloe entered Statutory Care just before her teen years having experienced sexual abuse and early childhood trauma. At 17 years old, she sadly took her own life. Chloe did try to raise an alarm at the time of the life ending incident. This briefing aims to highlight the key findings outlined in the Child Safeguarding Practice Review about this case.

Features of this case

- Multi-agency interventions in Chloe's life were characterised by 'crisis intervention' e.g. moving placements (multiple placements whilst in care), and a cycle of building new relationships.
- Experienced Childhood Trauma.
- The need for therapy was important, there was little understanding of what type of therapy was required. Missing Episodes.
- Risk of Sexual Exploitation from perpetrators across the country.
- Substance Misuse which impacted on Chloe's Mental Health.

Achieving Change

- Professionals need to be aware of language used to describe young people. Language used by some professionals suggested that Chloe was making informed lifestyle choices by placing herself at risk &/or conveyed negative attitudes/inferred judgement about her behaviour.
- Even though a child may be looked after, if allowed it is important to think about contact with family and how it can be enabled. 'Her parents might not have been able to always act in her best interests, but they had a special place in her heart and professionals did not consider that well enough'.
- Chloe's mother needed support to be a parent and wished she had been taken into care with Chloe, important to focus on how the Early Years impact on the Adolescent.
- It is important that practitioners are trained in trauma informed practice and are able to use this model in their practice and discuss in their supervision. The challenges of such complex cases and often working as a response to crisis.

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Findings

1. Compassionate Care. The overall response by practitioners, clinicians, police officers and key workers was characterised by sensitivity. For children who are looked after by the state, a sense of belonging can be difficult to achieve – although a stable placement and a school place can facilitate this. Chloe had neither -her sense of belonging was thwarted, and her scattered and fragmented memories undermined a sense of self.

2. The importance of family, friends and kinship: Chloe made it clear that memories of her past are constant – I was struck by the significant sense of sadness about her life experiences and that she felt alone – family separation was a measure of her despair and loneliness. (*Report Author: B Griffin and E Murphy*) Chloe was often asked about her wishes and feelings. Her most consistent wish was a placement close to her family and friends.

3. A Sense of Self. Chloe consistently expressed her interest in animals and spoke of her desire to study animal welfare/ to be a beautician. Knowledge about Chloe was scattered, and her sense of self was fragmented. Not unusual for young people whose experiences are similar to Chloe. Relevant research and literature about adolescent development describes the formation of personality during this time. Critical components of this include identity formation and a search to belong. Chloe had aspirations and dreams, but these dreams and aspirations were not realised - the chaos of her life in care; the repeated trauma and cycling of unresolved trauma, was mirrored in the chaos management within the system.

4. Working hard to catch up. Multi-Agency intervention in Chloe's life was characterised by crisis intervention. Too often the urgent drove out the important, professionals need to constantly reflect on risk and adjust care plans accordingly. Sharing information in a timely manner would have been crucial to reduce the risk of her harming herself.

5. Transitions. Insufficient placements for young people with complex needs was a factor in this case which is something that needs National attention. Professionals should consider how transitions points can be reduced and where required, consider how to improve consistent relationships, so the moment does become a negative milestone for the child.

Reflect on the findings and discuss the implications for your practice/team. This information should inform the steps you and your team will take going forward.

The full SPR Report can be downloaded at: www.croydonlscb.org.uk/reviews-and-briefings

Additional Resources

- NSPCC.ORG.UK
- KOOH.COM
- PAPYRUS-UK.ORG
- GRASSROOTS SUICIDE PREVENTION