

# Policy & Procedure Document

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<b>Title</b>	<b>: Children at Risk whose parents misuse drugs and alcohol</b>
<b>Ref. Number</b>	<b>: To be allocated by Customer Services</b>
<b>Date Last Amended</b>	<b>:</b>

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## 1. POLICY STATEMENT

- Why is the policy necessary?  
*Many children are referred to Children & Young People's Services because of concerns for their safety and welfare. Subsequent enquiry will frequently reveal that an element in their care is the effect of the misuse of alcohol and drugs by one or both of their parents or carers. The impact of parental problem drug and alcohol use on children is immensely complex.*
- What it is trying to tell people?  
*This Policy Document is to recognise the issues involved and to explain a Pathway for the proper assessment of such a situation and to devise a means for an appropriate SCODA assessment of the needs of each of the individuals involved and to assist in developing an appropriate Child Protection Plan.*

## 2. POLICY INFORMATION

- What does the policy cover?  
*This Policy will address the recognition that parental substance misuse may be a significant factor in the parent' abuse of a child or in their inability to adequately meet their parenting responsibilities to a child. The Policy will propose a means to ensure that a comprehensive assessment is conducted and relevant plans in respect of both adult and child are developed.*
- Outline the "Who, What, Why" etc  
*This Policy document will provide responsibilities for staff from both the Community Substance Misuse Service and from the Children & Young People's Services.*

### 2.1 Service-Specific Policy Information

- Is there information that is specific to particular service(s)?  
*This Policy will outline tasks to be undertaken by both Adult Services and Children & Young People's Services.*
- Outline as sub-sections the information that relates to each of these services/areas.

The Community Substance Misuse Teams (CSMT) provide a service to people who have a history of, and current problems, with their use of drugs and/or alcohol.

The Children & Young People's Service (C&YPS) will be working to address issues in respect of ensuring the welfare and safety of children who are considered to be at risk of significant harm.

### **3. PROCEDURE DETAILS**

*The procedure is summarised in the flowchart attached:*

- 1. In any case in which the CSMT has involvement enquiries will be made whether the service user has any responsibility at that time for the care of any children. On the basis of their knowledge at that time consideration will be given by the case worker as to whether that child is in a situation that puts them at risk of harm. If this is the case, the CSMT Worker will contact the Helpdesk of the Safeguarding Team to discuss their concerns or, if that child has a case manager currently involved, they will liaise with that individual.*
- 2. Staff from CSMT should continue to review any Child Protection implications over the period that they are actively involved with a service user. Where there is any doubt advice and consultation is to be sought from the Helpdesk. This will be endorsed and monitored through staff supervision practice.*
- 3. Where a case is being worked by a Social Worker from the Children & Young People's Service, enquiries will be made as to whether any adults in the household have a significant problem with the misuse of drugs and alcohol. In such event liaison is to be established with the CSMT to establish if they have current involvement and, if so, to seek information in respect of that individual. Prior consent should be sought from the adult for permission for these enquiries, where possible. However a failure to gain permission, or should it be felt that seeking permission might place the child at greater risk, these enquiries are still to be pursued.*
- 4. Where there is no prior knowledge or current involvement by the CSMT, an initial assessment will be made by the CSMT of the impact that such substance misuse has on the adult's ability to meet the parenting and care needs of the child. Parental consent should be sought for this assessment and, wherever possible, an initial joint visit should be made by the Child's Social Worker and the worker from CSMT.*
- 5. It is important that workers from the C & YP Portfolio should ensure that there is appropriate liaison with Maternity services and others and that CSMT Staff are fully involved in that process.*
- 6. If there are concerns about the extent of drug or alcohol abuse by a parent, a member of the CSMT should be invited to the Child Protection Conference even where the adult has failed to co-operate with an initial assessment.*
- 7. The Child Protection conference may ask that an assessment is conducted in respect of the misuse of substances and the implications that may have on the welfare of the children. This assessment should be conducted jointly by adult and child agencies and is*

*to be completed in accordance with the guidelines developed by the Standing Conference on Drug Abuse (SCODA).*

8. *The process and outcomes of this assessment should be fed into the Core Group of which the CSMT should be a member for the duration of the assessment and any ongoing work by the CSMT. This assessment may also be expected to consider substance misuse by the young person where there is a factor. All assessments are to be provided in writing for the Core Group and Conference.*
9. *It is possible that any such assessment will identify mental health concerns and there may be involvement additionally in this respect.*
10. *All Child Protection concerns are to be managed within the context of the Procedures adopted by the Telford & Wrekin Safeguarding Children Board.*
11. *On occasions the CSMT may be asked to contribute less formally on assessments being conducted as part of the Common Assessment Framework. This may identify that a child is in need even if the Child Protection threshold is not considered to be met. The CSMT may on occasions be the agency who identifies problems and will make a referral to the Schools & Community Services (ISA).*
12. *Staff members from the CSMT may therefore have a role in TAC meetings where work is being done with families and substance misuse is a significant issue.*

#### **4. CROSS-REFERENCE INFORMATION**

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|---|--|
| • Hidden Harm   | Home Office                            |
| • Drug Using Parents and their children Abuse (SCODA) | Local Govt Standing Conference on Drug |
| • Drug using parents – Policy Guidelines              | SCODA                                  |

#### **4.1 Linked Policies & Procedures**

Child Protection Procedures

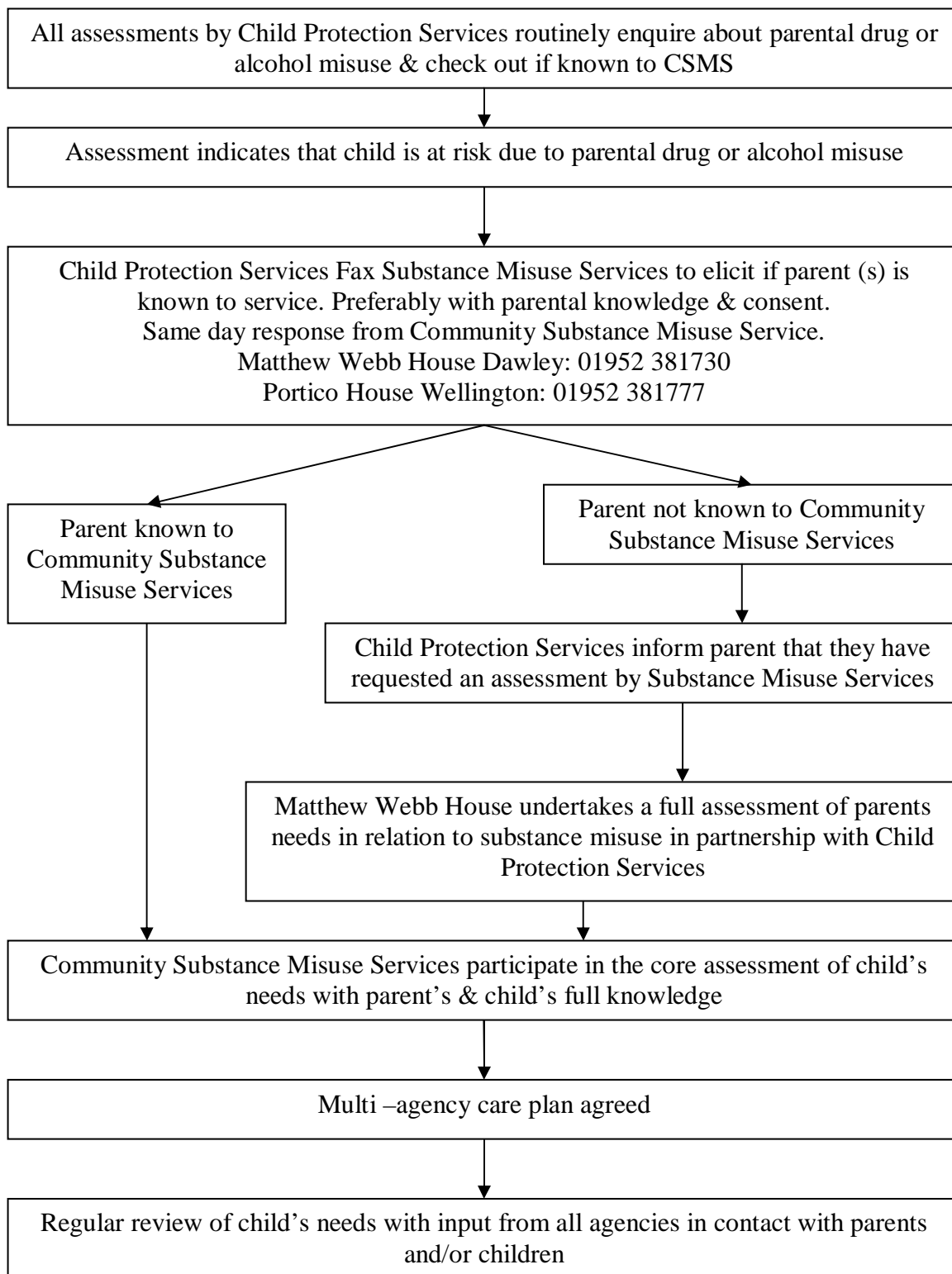
Safeguarding Children Board

#### **4.2. Recognised Standards & Legislative References**

#### **5. DOCUMENT MANAGEMENT**

- Date First Issued
- Dates Amended
- Date Approved
- Date Due For Review
- Review To Be Managed By

## Community Substance Misuse Services/Child Protection Pathway



**Telford & Wrekin**  
**Assessing Risks when Working with Alcohol & Drug Misusing Parents**

This assessment should be a joint assessment between Children’s Services and Substance Misuse Services

Date assessment started..... Date Assessment completed.....

Family Name.....

Address.....

.....

	Family Members	d.o.b.	Age	Gender	Ethnicity	Religion	Currently Living at?
	<b>Parent(s)</b>						
<b>1</b>							
<b>2</b>							
<b>3</b>							
	<b>Children</b>						
<b>4</b>							
<b>5</b>							
<b>6</b>							
<b>7</b>							
<b>8</b>							

	<b>Provision of Basic Needs</b>	<b>Assessment</b>
<b>9</b>	Is there adequate food, clothing and warmth for the child(ren) ?	
<b>10</b>	Is the child(ren)'s health and development consistent with their age and stage of development	
<b>11</b>	Is the child(ren) registered with a GP and dentists and is health care sought when appropriate	
<b>12</b>	Is the child(ren)'s attending nursery or school regularly? Is s/he achieving appropriate academic attainment?	
<b>13</b>	Is the child(ren)'s engaged in age-appropriate activities?	
<b>14</b>	Is the child(ren)'s emotional needs being adequately met? <ul style="list-style-type: none"> <li>o Is care consistent and reliable</li> <li>o Does the parent(s) respond to distress or challenging behaviour appropriately</li> <li>o Are their non alcohol/drug using adults in family readily accessible to child(ren)</li> </ul>	
<b>15</b>	Are there any indications that any of the children are taking on a parenting role within the family? <ul style="list-style-type: none"> <li>o Caring for other children</li> <li>o Excessive household duties</li> </ul>	

<b>Procurement of Drugs/Alcohol</b>		<b>Assessment</b>
<b>16</b>	Is the child(ren) left alone while parent(s) are procuring drugs/alcohol?	
<b>17</b>	Is the child(ren) being taken to “places of risk” in relation to parents drug/alcohol use?	
<b>18</b>	How much are alcohol/drugs costing?(per day/per week)	
<b>19</b>	How is money obtained?	
<b>20</b>	What are the financial problems?	
<b>21</b>	Is the home being used to sell drugs?	
<b>22</b>	Are parents allowing the home to be used by other drinkers/drug users?	
<b>23</b>	What effect does this have on the children?	

<b>Health Risks</b>		<b>Assessment</b>
<b>24</b>	If drugs and or injecting equipment are kept at home are they kept securely? o Is the child(ren) aware of where drugs are kept	
<b>25</b>	Do intravenous drug using parents? o Share injecting equipment o Dispose of equipment appropriately	

	<ul style="list-style-type: none"> <li>○ Use a needle exchange</li> <li>○ Aware of health risk, Hepatitis/HIV.</li> <li>○ Is family up to date with Hepatitis A &amp; B vaccinations.</li> </ul>	
26	<p>If parents are engaged in a substitute prescribing programme(e.g. methadone/subutex)? are they:</p> <ul style="list-style-type: none"> <li>○ Aware of dangers of children accessing medication</li> <li>○ Taking adequate precautions to ensure this does not happen</li> <li>○ Aware of what to do if a child consumes prescribed or illicit drugs</li> <li>○ Is the parent aware of what to do if a child consumes large amounts of alcohol?</li> <li>○ Ensuring that child(ren) are adequately cared for when involved in support from Community Substance Misuse Services</li> </ul>	
27	Is alcohol kept safely in the home?	
28	Is the child(ren) permitted to use alcohol?	
29	Are parents aware of and in touch with local specialist agencies? How regular is contact?	
30	Does the parent drive a vehicle? <ul style="list-style-type: none"> <li>○ If on substitute medication (e.g. methadone/subutex), has the DVLA been informed?</li> </ul>	
31	Are there any issues with self harm?	

32	Are there any issues of domestic violence?	

<b>Family Social Network &amp; Support Systems</b>		<b>Assessment</b>
33	Do parents and children associate primarily with: <ul style="list-style-type: none"> <li>○ Other drinkers/drug users</li> <li>○ Non- users</li> <li>○ Both</li> </ul>	
34	Are relatives of parent(s) aware of alcohol/drug use and are they supportive of parent(s) child (ren)?	
35	Do parents accept help from relatives and non alcohol/drug using friends	
36	Is the family isolated because of: <ul style="list-style-type: none"> <li>○ Stigmatisation</li> <li>○ Living in a remote area</li> <li>○ Poor transport, access to support services</li> </ul>	

<b>Parents Perception of Situation</b>		<b>Assessment</b>
37	Does the parent(s) see their alcohol/drug use as harmful to themselves or their child(ren)? What impact does the parent(s) think their drug/alcohol use has on child(ren)?	

<b>38</b>	Is there evidence that the parent(s) places their own needs for drugs/alcohol before the care and needs of their child(ren)?	
<b>39</b>	Are parents aware of the responsibilities and powers agencies have to support and protect children at risk?	

<b>Children Services Worker (s)</b>	<b>Contact (Include phone number/ email address)</b>
<b>Substance Misuse Services Worker (s)</b>	

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