





Rapid Reviews: Baby A



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Newcastle Safeguarding Children Partnership			

Background

- Mum was healthy during pregnancy and Baby A met all milestones with the family providing good levels of care.
- Baby A's parents were thought to be separated but believed to be amicable and co-parenting. Dad was known to be involved but was not observed caring for Baby A.
- Police received a call about a drunken argument between Mum and Dad and this was referred to CSC due to concerns for Mum's welfare.
- Baby A was admitted to hospital at 6-weeks-old with life threatening injuries likely to have been caused by shaking.

Dad's background

- As a child Dad suffered neglect and abuse and was placed in care at a young age. He had negative experiences while in care. Dad self-reported anger issues but wasn't known to have received any support to address this.
- Dad had limited family support in the North-East. He stayed with Baby A's maternal family when he was visiting Baby A.

Learning





- Baby A was a very young baby and reliant on carers to meet all needs. They could be seriously injured if not handled with care, such as head and neck not being supported or shaken. More information can be found [here](#).
- A baby's main method of communication is [crying](#). Both parents need to know how to respond to a crying baby.
- Though Dad acknowledged his behaviour on the night out was not acceptable and asked for help it does not appear any support was put in place.
- Professionals must consider what impact the parent's own childhood might have on their ability to parent.
- Professionals must consider what is the parenting like under the influence of alcohol - do parents demonstrate lower levels of frustration tolerance, heightened impulsivity, and poor emotional and behavioural regulation?
- Professionals should have supported both parent/carers to understand the baby's stage of development and what this means for care and safety.

Learning

- The role of dads should be considered – what is known about their involvement with the child and what is their caring role? What strengths/risks does the dad or male carer bring to the family?
- Professionals should explore how baby's demands for their basic needs are dealt with by parents and wider family?
- Be curious - what do you know about the adults in the baby's life and what risks and/or protective factors do the adults pose?
- It is essential to assess the Dad's/male carer's parenting capacity as well as Mum's. No contact was made with Dad by the health visitor or early help services.
- Whilst family members advised of concerns regarding how Dad handled Baby A, these were only shared after the injuries.
- There was some evidence of coercive control by Dad after the injuries were sustained.

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