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Health



Will Quince MP

Parliamentary Under-Secretary of State
for Children and Families

Annie Hudson
Chair of the Child Safeguarding Practice Review Panel
By Email

27 April 2022

Dear Annie,

We are writing, further to the Secretary of State for Education's letter of 19 November 2021, in response to the Child Safeguarding Practice Review Panel's third national review 'The myth of invisible men: safeguarding children under 1 from non-accidental injury caused by male carers.'

When we wrote to you last year, we welcomed the report and the Panel's findings, which are extremely helpful in improving our understanding of the long-standing challenges facing vulnerable infants and their families. We remain committed to strengthening the child protection system including improving practice and focusing on fathers and male carers.

It will also be important to review our work programme in this area in light of the forthcoming publications of the Independent Review of Children's Social Care, and the national reviews you are undertaking into the circumstances surrounding the tragic deaths of Arthur Labinjo-Hughes and Star Hobson. In the immediate term, in response to the Panel's recommendations, we have agreed a cross-Government programme of work focusing on strengthening whole family approaches and improving evidence, which is set out below.

Supported with £265k of Government funding, we have agreed with Hertfordshire to scope adaptations to their multi-disciplinary Family Safeguarding model so that it addresses the needs of under 1s and focuses on male carers. In addition, we are providing £544k to fund 13 local authorities across five regions to focus on multi-agency approaches to safeguarding infants, of which some will focus on supporting male carers or care leavers who become young parents. We have also awarded over £25million over two years to Police and Crime Commissioners to increase availability of interventions for perpetrators of domestic abuse, including interventions that take a family approach such as the Hertfordshire's 'For Baby's Sake', Barnardo's 'Opening Closed Doors' and Stockport's 'Caring Dads'.

We will continue to look at how the Family Hubs, Supporting Families and Start for

Life programmes better address concerns about service engagement with male carers. We have asked local authorities, through Family Hubs, to better engage fathers and male carers by making services more accessible with an emphasis on whole family working. Family Hubs behavioural insights projects will design communications to engage fathers and male carers with parenting programmes, and in peer-to-peer Fathers' Support Groups. The recently expanded Supporting Families programme, which received an additional £200m at the 2021 Autumn Budget, creates opportunities for us to share best practice of engaging with male carers within the programme's whole family work. Start for Life guidance will ensure services engage with and are accessible to fathers and male carers, including by co-designing support with parents. We will be further encouraging this through the design principles for local Start for Life offers and sharing and promoting best practice. We are also exploring opportunities for a national public health campaign and locally targeted support, building on the £100m investment in 75 areas to support perinatal mental health and parent-infant relationships. In addition, the Family Nurse Partnership National Unit is focused on building local system capabilities, addressing specific priorities like engaging fathers, by enabling vulnerable parents to provide sensitive, responsive care for their infants. The NHS is working through local maternity systems (LMSs) to continue to make maternity and neonatal care safer, more personalised and more equitable for mothers and fathers.

We are also taking a number of steps to improve data capture and sharing to support better join up across agencies who work with vulnerable families. We are enhancing the timeliness and usefulness of data on Serious Incident Notifications, including by data matching with the National Child Mortality Database, as recommended in your previous review 'Out of routine: a review of sudden unexpected death in infancy in families where the children are considered at risk of significant harm'. We are also working with local authorities to build our understanding of how serious incidents are prevented, reviewing national data to identify incident reporting variations to give us better insights into strong practice and working to understand how existing national data sets in community health and children's social care can be better linked to support information sharing.

Finally, we recognise the importance of evidence in understanding the factors that lead to harm. We will utilise the learning from the £2m domestic abuse perpetrator research funded by the Home Office to help to identify perpetrators, drivers of violence and 'what works' to prevent reoffending. In addition, the Department for Education has commissioned the What Works Centre for Children's Social Care to undertake an in-depth review of a sample of local safeguarding partners' annual reports to help identify and disseminate good practice in safeguarding under 1s. The What Works Centre will also be evaluating a number of locally developed interventions that support fathers and male carers to better care for vulnerable babies. In response to the SUDI review, the National Institute for Health Research (NIHR) is also investigating behaviour change-informed approaches to promoting safer sleeping for babies in high-risk groups. We will look for opportunities to share learning from other NIHR projects, including: the evaluation of ICON – a programme to support parents and carers with infant crying; evaluation of the 0-5 Public Health Grant Investment including health visitor engagement with fathers; and a planned evaluation of the multi-agency child safeguarding reforms.

Thank you, once again, for your helpful and constructive review and the engagement between the Panel and officials in recent months. We believe these actions provide a strong basis for further work and we look forward to continuing to work alongside you improving outcomes for vulnerable children.

Yours sincerely,



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