

Practitioner Guide to Pre-Birth Support and Assessment



This guidance has been written in collaboration with LHT Midwifery to assist in practice when undertaking a pre-birth assessment. It is informed by:

- [Born into Care: Developing best practice guidelines for when the state intervenes at birth](#)
- [Public Law Working Group Recommendations to achieve best practice in the child protection and family justice systems](#)
- [Leeds Safeguarding Children's Partnership multi-agency procedures for pre-birth assessment](#)

The key aims of the guidance are to ensure that:

- assessments begin as soon as possible to inform decision making for the baby
- support is accessed at the earliest opportunity to provide the optimal conditions for success
- parents are kept up to date with plans that are clear and explanatory
- extended family networks are informed and mobilised at the earliest opportunity, including the offer of [Family Group Conference](#)
- timely access to legal processes is provided where necessary, for example Public Law Outline (PLO).

Best Practice

The welfare of the child is paramount. Our aim is to ensure that, wherever possible, babies can remain safely within their family networks reducing the need for intrusive family court intervention. Young babies are particularly vulnerable to abuse, and early assessment, intervention and support work carried out during the period of pregnancy can help minimise any potential risk of harm. It is best practice to respond to concerns for unborn babies, with an emphasis on clear and regular communication between professionals working with the mother, the father/partner, and the family.

All professionals have a role in identifying and assessing families in need of additional support or where there are safeguarding concerns. In the vast majority of situations during a pregnancy, there will be no safeguarding concerns. However, in some cases it will be clear that a co-ordinated response by agencies will be required to ensure that the appropriate support is in place during the pregnancy to best protect the baby before and following birth.

Best practice for assessments which are required during a mother's pregnancy are:

- Form relationships with a focus on the unborn baby
- Ensure parents have time to contribute to the assessment and to increase the likelihood of a positive outcome to the assessment through a period of meaningful intervention and support
- Share a clear assessment plan of times, dates and who will be spoken too (this should be shared with parents at the beginning of the assessment and be written in the CAFA (Child and Family Assessment))
- All notes from assessment sessions should be shared with parents
- Assess the family's ability to adequately parent and protect the unborn baby and the baby once born
- Identify if any assessments or referrals are required before birth; for example for Early Help involvement or other support organisations
- Ensure effective communication, liaison and joint working with adult and health services that are providing on-going care, interventions and support to a parent(s)
- Plan on-going interventions and support required for the unborn baby/child and parent(s)
- Understand the impact of risk to the unborn baby when planning for their future
- Explore and agree safety planning options
- Avoid delay for the unborn baby/child where a legal process is likely to be needed such as Pre-Proceedings (PLO), Care or Supervision Proceedings in line with the Public Law Outline

Assessment

A detailed pre-birth assessment can provide an early opportunity to develop a good working relationship with parents during the pregnancy, especially if there are concerns. Knowing that there are concerns for an unborn baby means that parents, carers, and extended family members can be anxious and feel very emotional. It is important to undertake assessments during early pregnancy so as parents are given opportunity to voice their wishes and feelings, share information and demonstrate any need for change, and that parents can be offered support early on, allowing them the best opportunity to parent their child safely and effectively. Importantly, it helps identify babies who may be likely to suffer significant harm and can be used to develop plans to safeguard them.

A CAFA (Child and Family Assessment) for an unborn child should include some additional information that you would usually explore as part of the Assessment Triangle. This would include:



Pregnancy Background

Parents' Feelings: Is the pregnancy planned or unplanned? Is domestic abuse an issue in the parents' relationship? Have they sought appropriate antenatal care? Are they aware of the unborn baby's needs and able to prioritise them? Do they have realistic plans in relation to the birth and care of the baby?

Attendance and engagement with ante natal care/Midwifery/Health Visiting services.

Is there current substance or alcohol misuse, or any history of this?

It is important to discuss with the parents/partners views and attitudes towards any previous children who may have been removed from their care, or where there have been serious concerns around safeguarding or parenting practice. If children have previously been removed, then the assessment should explore what is different now for each parent since the child was removed. Practitioners undertaking the assessment should have a good understanding of any previous history to identify areas of improvement or ongoing concern.

Parenting Capacity

Current relationship status with father of unborn child? Who will be the main carer for the baby? What expectations do the parents have of each other regarding parenting? Role of father/partner in the pregnancy? Role of the father/partner for the child after birth? Role of child in adult relationship? Network of support should be explored this should include friends, family members and significant individuals in the lives of the parents.

Does either parent have additional needs or learning disability? If so, how can support and assessment be tailored to meet their needs. Consideration should be given to using tools that support assessing parents with additional needs or diagnosed or undiagnosed learning needs.

Planning for the Future: Preparation for parenthood, e.g. environment, equipment or birth plan, realistic / appropriate or unrealistic / inappropriate expectations

Working with Fathers/Partners

Fathers play an important role during pregnancy and after. The [National Service Framework for Children, Young People and Maternity Services \(2004\)](#) states:

'The involvement of prospective and new fathers in a child's life is extremely important for maximising the life-long wellbeing and outcomes of the child regardless of whether the father is resident or not. Pregnancy and birth are the first major opportunities to engage fathers in appropriate care and upbringing of children' (NSF, 2004).

It is important that all agencies involved before and after the birth, fully consider the significant role of fathers, partners (including same sex relationships) and wider family members in the care of the baby even if the parents/carers are not living together and, where possible, involve them in the assessment. This should include the father/partner's attitude towards the pregnancy, the mother and newborn child and their thoughts, feelings and expectations about becoming a parent.

Does the father have any recent or historical involvement with Children's Social Work Service?

Information about partners who are not the biological parent should be gathered at the earliest opportunity to ensure that any risk factors can be identified. A careful assessment of the role that the person has in relation to the mother and any other children in the household as well as their views about the future care of the baby should be undertaken.

Family Group Conference

When undertaking a pre-birth assessment, a Family Group Conference referral **must** be made in all circumstances. Consent for the Conference will be obtained by the Family Group Conference Coordinator.

This is the only instance whereby the referral **must** be made before consent of the parent is obtained. In all other assessment scenarios, the social worker will obtain the consent prior to the referral

Assessment Outcomes

As with any CAFA (Child and Family Assessment) there can be different outcomes for assessments that have been undertaken for children who are unborn. This could be – closure, CIN (Child In Need) Plan, or if the child is at risk of significant harm then consideration needs to be given to if a CP (Child Protection) Plan, PLO (Public Law Outline) or of removal of the baby at birth.

As the outcome of the assessment will come at a changeable and emotional time, it is important that the plans for the baby are communicated with the family as early as possible. The CAFA (Child and Family Assessment) should be completed within **45 working days**.

Pre-Birth Planning Meetings and Birth Planning Arrangements Form

A Pre-Birth Planning Meeting can help the family and professionals ensure there is a clear plan in place if there is a support need or concern of significant harm for the baby. This can take the guise of any multi agency meeting that would take place as part of the assessment, a CIN or CP workflow. It is expected that an Advanced Practitioner or Manager chairs the meeting to ensure a detailed plan to support or safeguard the baby is implemented around the time of birth. The Safeguarding team at the hospital should be present at the planning meeting including in-patient team leaders if required.

It is the responsibility of the Social Worker to complete the Birth Planning Arrangements Form by 34 weeks of pregnancy. It should have all relevant information contained including full names, addresses and telephone numbers. The plan for when the baby is born should be clear. It will detail the planning for delivery and the immediate period after the birth, including who should be notified upon the birth of the baby. The need and plan for any supervised contact should be set out clearly, with safe adults identified. Children's Social Work Service will be responsible for organising safe contact if there is a need for supervision, the hospital will not be able to provide any supervision. The Social Worker will ensure that it is shared with the professional group and the parents/family. All professionals will need to be clear about their role and that of others, which should be set out in the document. It is best practice that the Birth Planning Arrangements Form is shared with parents. There are times when sharing the plan is felt to put the mother or baby at increased risk of harm. In these circumstances the risks around this need to be fully explored and a clear written rationale on the child's case record is required if the plan is not to be shared. It is the responsibility of the Social Worker and their Team Manager to ensure that this is completed.

In instances whereby a baby is to be placed away from parents following the birth with alternative family members or in foster care, it is best practice that it is the Social Worker who will collect the baby. A professional ID badge and a copy of any Court Order made will be required when the baby is being collected.