

Cumulative Harm Workshop

You will need

- This instruction sheet
- The Case Study
- Cumulative Harm Specialist Practice Guide
- Child Development and Trauma Guide

Individually (20mins)

- Read through the notification in your case study.
- Your task is to complete the investigation for this notification. The notification report, which noted a recurring pattern of concerns has alerted you to the need to make a cumulative harm assessment.
- With the case study in mind, skim through the *Cumulative Harm Specialist Practice Guide*. Think about what might be relevant for making a cumulative harm assessment in this case. The overview, information gathering, and analysis and planning sections will be of most relevance. As you are reading, it may help to jot some notes directly onto the *Cumulative Harm Specialist Practice Guide*.

The *Cumulative Harm Specialist Practice Guide* can be downloaded from
www.aifs.gov.au/nch/research/menu.html#spg

As a group (10 mins)

Summarise the notification *in plain English* under the criteria of: frequency, type, severity, source of harm and duration of abuse/neglect/violence

As a group, complete one of the following activities (30 mins)

Based on the information available to you in the notification, summary of the home visit and the summary of the discussion with the classroom teacher:

1. Describe *in plain English* any parental or family indicators of cumulative harm
2. Describe *in plain English* what is happening in the child's daily life

The *Child Development and Trauma Guide* can be downloaded from
www.office-for-children.vic.gov.au/every-child-every-chance/library/publications/best_interests

3. Make an assessment *in plain English* of Dillon's physical, psychological and emotional wellbeing. Are there any signs that he is not reaching developmental milestones? Are there any indicators that he is experiencing symptoms of trauma? (use the child development and trauma guide to help you)
4. Make an assessment *in plain English* of Lauren's physical, psychological and emotional wellbeing. Are there any signs that she is not reaching developmental milestones? Are there any indicators that she is experiencing symptoms of trauma? (use the child development and trauma guide to help you)

At the completion of the activity you will need to have written a brief paragraph or series of dot points *in plain English* detailing your assessment. These will be presented to the group.

Use plain English in your descriptions and assessments

- Brady has stated on numerous occasions that he is an alcoholic and mentally unstable.
- Jodi was spoken to and showed police recent cuts on her arms that she had made due to her mental state at the moment.

Child Protection HISTORY:

There is a child protection history recorded for the family (concerns include domestic violence, mental health issues and marijuana use (Jodi) and alcohol use (Brady)).

An IA (UNSUB CHINOP) was completed in November 2008 (the family were linked with community and mental health) and the family have also recently been before the SCAN team. It is noted in SCAN minutes (March 2009) that no concerns were raised by health and education were monitoring Lauren.

- 29/11/2008-13/05/2009 – 4 x CCR's related to multiple Domestic Violence Incidents, neglectful parenting, unhygienic living conditions and mental health concerns.
- 19/10/2007 – CPN - plus 3 x additional notified concerns – IA commenced 31/10.2008 – Unsubstantiated CHINOP – Concerns related to Lauren being touched inappropriately by person dossing at child's home and 2 x domestic violence incidents where police attended. Family were linked in with support services.
- 25/2/07 Notification re neglect issues – Unsubstantiated CHINOP
- 24/05/2006 Notification: A DVO had been issued on Jodi preventing her from returning to the residence. She was concerned about Brad's capability to look after Dillon while she wasn't there.
- 22/08/2005 CCR involving Lauren
- 03/12/2001 UnSub IA involving Lauren

Re: Smith, Brady as subject child

- 04/07/1997 – Intake received
- 07/09/2001 – Notification received re neglect (recorded as Protective Advice)
- 01/10/01 – Intake received
- 30/11/01 – Notification received re physical harm and neglect
- 02/12/01 – Initial assessment recorded as unsubstantiated
- 17/12/01 – Intake received
- 20/04/2004 – Intake received

Re: Brown, Jodi as subject child

- 09/12/2004 – Notification receive re emotional and physical harm and neglect
- 21/12/2004 – Intake received
- 17/01/2005 – Intake received

Assessment: CPN – Emotional harm – Parental Conditions

Taking into consideration the extensive child protection history an current concerns a decision has been made to record a notification based on the following

- From the start of 2009 to 24/05/2009 Police have attended the residence 11 times due to domestic violence as a result of the parents mental illnesses.
- On all occasions Police have noted the house was in a disgusting state with property scattered throughout the house and on occasions have noted faeces on the floor and the general smell of urine throughout the house.
- Current child protection concerns and child protection history indicate an ongoing pattern of inadequate parenting as a result of both parents mental illnesses.
- The parental deterioration impacts on the children by the continued and ongoing exposure to domestic violence.
- A holistic assessment is required which is not isolated to the incidents mentioned due to the recurring nature of events. Although there is no evidence to suggest that the children's health, development and emotional stability are being immediately affected there is much to suggest that if this parental behaviour continues the children will deteriorate rapidly.

Harms

Name of child: Smith, Lauren

Harm category

Neglect Yes No Most serious
Physical harm Yes No Most serious
Sexual abuse Yes No Most serious
Emotional harm Yes No Most serious

Name of child: Smith, Dillon

Harm category

Neglect Yes No Most serious
Physical harm Yes No Most serious
Sexual abuse Yes No Most serious
Emotional harm Yes No Most serious

Concerns expressed/ Details of harms

Taking into consideration the extensive child protection history and current concerns a decision has been made to record a notification on the following

From the start of 2009 to 18/06/2009 Police have attended the residence 11 times due to domestic violence as a result of parents mental illnesses.

On all occasions Police have noted the house was in a disgusting state with property scattered throughout the house and on occasions have noted faeces on the floor and the general smell of urine throughout the house.

Current child protection concerns and child protection history indicate an ongoing pattern of inadequate parenting as a result of both parents mental illnesses.

The parental deterioration impacts on the children by the continued and ongoing exposure to domestic violence.

A holistic assessment is required which is not isolated to the incidents mentioned due to the recurring nature of events. Although there is no evidence to suggest that the children's health, development and emotional stability are being immediately affected there is much to suggest that if this parental behaviour continues the children will deteriorate rapidly.

Other relevant information

Comments

Decision/Action

Was information provided to the police under the Child Protection Yes No Act 1999 s 14(2)?

Were any of the subject children moved to a safe place under the Yes No Child Protection Act 1999 s 21?

Is this notification to be assessed by another CSSC? Yes No

Final response timeframe 10 days

Home visit

You head out first thing and arrive at about 9.30am. Jodi (mum to Dillon) opens the door and with sigh of resignation says when you identify yourself that you better come through to the kitchen. Jodi looks tired and you notice fading yellow finger mark bruising around her neck (presumably the effects of the incident 5-days prior attended by police).

The house is a rectangle with a centre hall. The odour of urine hits you as you make your way down the hallway. There are bedrooms on either side of the front entry, and a third room on the left. An L-shaped living, dining and kitchen run down the right hand side of the house and around the back. Through the mess of glasses, bottles, toys, dirty nappies, clothing, catalogues and dirty dishes you note the once beige carpet in the hall and lounge are grey with dirt and stains. The kitchen is piled with dishes and there are dirty clothes spilling out of the laundry, which is off to the left of the cramped dining area. The smell of urine is even stronger here and you also note used disposable nappies among the pile of washing.

Sitting down at the table beside 18-month old Dillon's highchair, Jodi indicates for you to take a seat. Dillon who is focussed on his breakfast doesn't appear to pay any attention to your arrival or Jodi's return. Jodi lets you know that Brady (Dad to Lauren and Dillon) is out walking 8-year old Lauren to school.

As you talk to Jodi she tells you that Brady's problems with his schizophrenia have escalated lately, he drinks because it just helps him to settle down, but if he has too many he does sometimes get violent with her. She tells you that he doesn't hit the kids. He gets frustrated and he'll yell at them if they are too noisy – Lauren normally takes Dillon into his room when Brady starts getting agitated. She's not 100% sure, but Jodi doesn't think they've actually seen her and Brady fighting. As Dillon seems to have finished eating Jodi grabs a blanket from the back of the couch, clears a space and puts it on the floor in the lounge room, she pulls out a play pen and drops this down over the blanket before putting Dillon in with a handful of trucks and turning on the TV.

Her and Brady have been having financial problems, which has been stressing them both out. She confirms that she had been cutting again and tended to do this when she was anxious. They are behind in the rent and haven't been able to afford their medication. Jodi doesn't really like to take it anyway as it makes her really drowsy and she worries that she won't wake up to Dillon if he cries out during the night. You notice that Dillon is still quietly in the playpen with a truck in hand and watching the TV. You ask Jodi about how much time he spends in there and she tells you that she's been feeling a bit down lately and the housework has really gotten on top of her, she doesn't like Dillon crawling around on the dirty floors so tends to put him in the play pen. She tells you what a good baby he has always been, no trouble at all, he likes the TV, and as long as he has got some toys he's always seems fairly content in the play pen.

Brady returns home as you are chatting and gets upset when he realises why you are there. He starts yelling and swearing at you and at Lauren – they love the kids, his kids are not going to go through what he and Jodi had to put up with in care, they just need to be left alone and for people to stop hassling them, that the neighbours needs to mind their business. He warns Jodi not to trust you and not to say anything she'd regret before heading out, slamming the front door as he leaves. As he leaves Dillon who had sat frozen during Brady's tirade starts to cry, but doesn't get up or reach for Jodi. Jodi also starts to cry. She tries to reassure you that Brady is a good Dad and how much he loves her and the kids, that they are both just stressed at the moment and the welfare always sets him off after what happened to him in care. She tells you that Brady needs her, she's his full-time carer. They just need some help at the moment to get his schizophrenia under control.

Phone call to class teacher

You manage to catch Lauren's classroom teacher briefly over the phone during a break later that day, she tells you that Lauren's attendance is patchy, that she always has her lunch, but that sometimes her clothes smell. She's quiet and very shy, and is always very well behaved in class. In terms of her school work, she is quite a bit behind most of her classmates and struggles especially with reading. Lauren is very good with the younger children – she's like a little mother to them. Actually, Lauren tends to spend recess and lunch playing with the younger kids, she doesn't really have any friends from her class.