

Pre-birth

SCOPE OF THIS CHAPTER

Please note that providers of health services, in particular those providing midwifery services, may have their own detailed agency specific guidance which should be read in conjunction with this guidance.

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1. Introduction

Babies can be particularly vulnerable to abuse, and early assessment, intervention and support provided during the antenatal period can help minimise any potential risk of harm. This guidance provides advice on how to respond when there are concerns for unborn babies; it emphasises the importance of clear and regular communication between professionals when working with the mother, the father and the family.

All professionals have a role in identifying and assessing those families in need of additional support and in sharing information where there are safeguarding concerns. . Most pregnancies will not raise safeguarding concerns. However, in some cases a co-ordinated response by agencies will be required to ensure that the appropriate support is put in place during the pregnancy with the aim of safeguarding the baby before, during and following birth.

The antenatal period provides an opportunity for practitioners and families to work together to:

- Form relationships with a focus on the welfare of the unborn baby;

- Identify strengths, risks and vulnerabilities;;
- Assess potential risks to the unborn baby ;
- Explore and agree safety planning options;
- Assess the family's ability to safely parent and protect the unborn baby and the baby once born;
- Identify if any assessments or referrals are required before birth; for example an Early Help assessment or referral to Children’s Social Care for a Pre-Birth Assessment;
- Ensure effective communication and joint working with health and other services that are providing on-going care, treatment and support to a parent(s);
- Plan and agree on-going interventions and support required for the child and parent(s);
- Identify at an early stage if care proceedings are likely to be needed.

If a professional becomes aware that a woman is pregnant, and they have concerns for the welfare of the mother, unborn baby, or any siblings, they should not assume that Midwifery or other local Health services will be aware of the pregnancy or the concerns identified. Midwifery Services should, therefore, be informed of the pregnancy, and any concerns. . The professional should seek the consent of the expectant mother to share information with midwifery services in this way, unless to do so would place the unborn baby or others at increased risk of harm. Where the concerns relate to significant harm, a referral should be made to Children’s Social Care (see Referrals procedure).

Professionals should consider whether the new-born baby will be safe in the care of these parents/carers and if there is a realistic prospect of these parents/family being able to provide adequate care throughout childhood. If not, a pre-birth assessment (led by Children’s Social Care) may be required.

Each professional should follow their agency’s child protection procedures and, in complex cases or if they are unsure of the most appropriate response, they should discuss any concerns with their safeguarding lead. .

2. Identifying Risks

The following parental or family risk factors can indicate an increased risk to any unborn child / baby and, if they are identified, a Pre Birth Assessment may be required:

- A previous unexplained death of a child whilst in the care of either parent;
- Parental substance misuse (drugs and alcohol) which is likely to impact on the baby's safety, health or development;
- Perinatal/mental illness which is likely to impact on the baby's safety, health or development;
- Victims or perpetrators of domestic violence and abuse;
- Where there are significant concerns about parental ability to self-care and/or to care for the child.
- Where any other concerns exist that the baby may be at risk of Significant Harm.
- Where either parent of the unborn child is under 18.
 - Family history of Female Genital Mutilation (FGM)
 - Where there are maternal risk factors towards the unborn baby.
 - Either parent is or was a Looked After Child);

The list is not exhaustive and, if there are a number of risk factors present, then the cumulative impact may well mean an increased risk of significant harm to the child. Professional curiosity should highlight to any practitioner that if they are in doubt, they should seek advice from their Safeguarding lead or Children's Social Care before making a referral.

3. Working with Fathers or Significant Partners

Fathers play an important role during pregnancy and in children's lives.

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 or same sex partner is resident or not. Pregnancy and birth are the first major opportunities to engage fathers/partners in appropriate care and upbringing of children' (NSF, 2004).

It is important that all agencies involved in the pre birth assessment and provision of support fully consider the significant role of fathers/partners and wider family members in the care of the baby even if the parents are not living together.

Information about fathers/partners should be obtained as part of the pre birth assessment and, wherever possible, the pre birth assessment should assess/ascertain the father's/partners attitude towards the pregnancy, the mother and new born child and their thoughts, feelings and expectations about becoming a parent.

Involving fathers/partners in the pre birth assessment is important if all strengths and risks are to be fully considered.

4. Protection and Action to be Taken

When any professional becomes aware that a woman (or the partner of a woman) with whom they are working is pregnant and they have concerns regarding the welfare of the unborn baby, they must inform maternity services of their service involvement and highlight any vulnerabilities they have identified. (consideration of consent)

It is important that all agencies should share relevant information with consent if required, to inform decision making when considering undertaking a Pre Birth Assessment and or provision of support at an early stage.

An Early Help assessment in relation to the unborn child should be considered in the first instance. If the mother is under 18, an Early Help Assessment should be considered for the Mother also.

Where a professional is concerned that an unborn child or other children in the family may be at suffering or likely to suffer, harm, they should seek advice from their agency Safeguarding Lead without delay with a view to making a referral to Children's Social Care- see

<https://www.kirkleessafeguardingchildren.co.uk/duty-and-advice.html>

Pre Birth Assessment Procedure

https://kirkleeschildcare.proceduresonline.com/p_pre_birth_assess.html?zoom_highlight=Pre+Birth

5. Multi Agency Pregnancy Planning Meeting

[Link to MAPLAG procedure](#)

[Terms of Reference SWANS Risk Assessment January 2019](#)

[SWANS PARTNERSHIP AGREEMENT - KIRKLEES January 2019](#)

6. Issues

A detailed pre-birth assessment provides an opportunity to develop a positive relationship with parents during pregnancy. As a result vulnerable parents can be offered early intervention and support, providing them with the best opportunity to parent their child safely and effectively. Importantly, it helps identify babies who may be at risk of significant harm, and can be used to develop plans to safeguard them.

The involvement of social care (especially if there is a decision to remove the baby at birth) can result in the parents going missing or the mother not attending hospital / concealing the birth.

It may have an adverse effect on the parents' mental or physical health or heighten the risks that had raised the concerns in the first place. The fear of losing the baby may undermine the attachment and bonding process between the parent and unborn child. There is a danger that the mother may harm herself or her unborn baby.

It is vital that there is clear and honest communication with the pregnant woman, the birth father/partner and, if different, her current partner in order to reduce the chance of such issues arising.

Further Information

[Concealed Pregnancy](#)

[The National Service Framework for Children, Young People and Maternity Services \(DoH, 2004\)](#)

[NICE guidelines \[CG192\] Antenatal and postnatal mental health: clinical management and service guidance](#)