

# Spotlight on reducing drift and delay in Public Protection work



Drift in a case is never intentional but can happen from time to time, often creeping in gradually, where a case remains open without purpose or direction, leading to delay in decision-making, intervention and opportunity for reducing harm. Drift and delay are not abstract concepts but are lived realities in Public Protection work. They are recurring themes in Learning Reviews and inspections of Adult Support and Protection and Child Protection. This summary explores what drift and delay look like in practice, why they occur, the link to thresholds and what helps professionals maintain purposeful, timely and protective responses.

The impact of drift and delay on the people we work with can be significant, with opportunities for earlier intervention and prevention being lost, risk escalating and harm continuing. For practitioners, drift and delay can lead to increased anxiety, self-doubt and defensive practice. Recognising drift early is essential for people we work with and for workforce wellbeing.

## What is drift and how does it happen?

Common indicators of drift include:

- Repeated assessments without meaningful change.
- Plans that are reviewed but not progressed.
- Lack of time-bound actions.
- Ongoing monitoring replacing intervention.
- 'Wait and see' approaches becoming the default, and when things appear 'good enough' a case is closed, leading to missed opportunities to see the cumulative negative effect on a child's health and development and the wellbeing of children and adults.
- In Adult Support and Protection, it may arise when concerns are 'held' due to capacity issues or perceived choice. In Child Protection, drift often appears when parental engagement masks limited change in lived experience.

Drift is particularly common when:

- Risk is being managed rather than reduced.
- Engagement is mistaken for progress, and disguised compliance is not recognised. Improvement can sometimes lead to a sense of over-optimism that a situation is better or 'good enough', leading to closure of a case.
- There is discomfort with escalation or statutory action, for example a fear that good working relationships with the family will be broken.
- Threshold fatigue is particularly risky, when long-running cases can desensitise workers to ongoing harm and can lead to an acceptance that 'this is just how they are' and an increase in tolerance levels.
- Professionals hope circumstances will improve naturally.

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## Delay

Delay can occur when legal proceedings are drawn out and the child or adult's case feels 'in limbo'. It is not simply about slow processes however; delay is about missed opportunities for protection. Delay allows harm to continue, risks to escalate, and patterns to become entrenched. Delay may be visible (for example, long gaps between visits or reviews, or court proceedings being extended) or hidden (including repeated deferrals, postponed decisions, or extended pre-threshold activity). It is often justified by:

- Waiting for further information.
- Giving 'one more chance'.
- Allowing time for services to have an impact.
- Managing competing priorities, organisational pressure, high caseloads and staffing gaps.

While proportionate timescales matter, delay becomes risky when time is used instead of action. In Public Protection work, time is rarely neutral. For children, adults at risk, and victims of domestic abuse, delay often benefits the source of harm rather than the person experiencing it.

## Understanding Thresholds

Understanding thresholds is important in tackling drift and delay. Thresholds describe the point at which concern requires a specific level of response, intervention or statutory action. They are not simply procedural markers; they represent professional judgement about risk, vulnerability and need.

Across Public Protection services, thresholds can become blurred when:

- Risk is assessed in isolation rather than cumulatively.
- Protective factors are over-estimated or assumed to be static.
- The absence of a crisis is mistaken for safety.
- Responsibility is deflected between services or teams.

Thresholds are particularly vulnerable to erosion in cases where harm is chronic, hidden or normalised, such as long-term neglect, coercive control, carer stress, or patterns of what is thought to be 'low-level' domestic abuse. In these situations, no single incident appears to 'tip' the case over a threshold, despite significant cumulative harm.

Thresholds should be viewed as dynamic, not fixed. As circumstances change, so should our assessment of risk.

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Good threshold decision-making relies on:

- Clear understanding of statutory duties and local guidance.
- Confidence to articulate professional concern.
- Willingness to challenge down-grading when risk remains.
- Recording the rationale for decisions, not just the outcome.

## How can we avoid drift and delay?

- Use Chronologies to help identify patterns and themes, rather than working solely on the basis of separate incidents or events. Chronologies are an essential tool for analysis and assessment, in turn supporting decision-making.
- Incorporate evidence-based approaches (such as Safe & Together) and research into practice to help assessment and indicators of future risk, and defensible decision-making.
- Avoid a 'you will be rid of us' culture. With the best of intentions, we can contribute to drift and delay by saying things such as 'If you just do the things in the support plan then you will be rid of us and you can get on with your life.' What this means for a family is that any changes they are making are only being done because 'it says so on the plan.' Focus on what life could look and feel like for the child, adult and family if things are better.
- Plans need to be SMART – be clear about who is doing what and when. Plans need to be reviewed regularly and adapted if something is not working.
- Workers need to regularly ask – what has changed for this child, adult, family? What has led to this change? Is this really an improvement? Can it be sustained?
- Keep a focus on lived experience, not service activity.
- Escalate concerns confidently and respectfully. Involve other services and make referrals where needed, for example to Police, Children's Reporter or the Mental Welfare Commission. Use legislation and measures to instigate change.
- Use supervision to help critical reflection and constructive challenge. Supervision provides an opportunity to re-evaluate thresholds, support decisive and defensible practice and agree next steps where a case has drifted or is at risk of drift. The regular oversight of managers can help focus on identifying drift and delay.
- Use reflective questions to stand back and critically assess what is happening:
  - If nothing changes, what will this look like in 6 months?
  - Who benefits from the current pace of the plan?
  - Are we managing risk or reducing it?
  - What decision are we avoiding?
- Review thresholds actively, not retrospectively.
- Use the [Resources section of the EMPPC website](#). Check out our Spotlight section on various topics to help you in your day-to-day practice.