Appendix 5

Threshold Framework



Meeting the Needs of Children, Young People and their Families in Luton



October 2017

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Welcome

Introduction

Welcome to Luton's multi-agency guidance on accessing the right help and support for children, young people and their families at the right time.

This guidance for threshold of need and intervention is a vital tool that underpins the local vision to provide targeted support services at the earliest opportunity - right through to specialist and statutory interventions when it is needed to promote the welfare and safety of vulnerable children and young people. It aims to offer a clear framework and a common understanding of thresholds of need for practitioners within all agencies, to help to promote a shared awareness of the different interventions required to effectively support children, young people and their families or carers.

Many agencies, professionals, parents, carers, family members and volunteers are involved with providing support, by collectively working together we can make improvements and a 'real difference' to the outcomes and life chances of the children and young people living in our area that need it the most. Understanding the access criteria for services and thresholds detailed within this guidance should strengthen local arrangements and help everyone to work together to identify the best support for an individual child, young person and their family or carers across the spectrum of need.

We hope you find this guidance helpful in supporting you to make a difference for children and young people. A copy of this guidance and additional resources to compliment this guidance, such as; advice on information sharing, the Early Help Assessment Assessment; the multi-agency referral form to make a referral to Children's Social Care services; and guidance on making a referral, are all available on the Luton Safeguarding Children Board (LSCB) website at http://lutonlscb.org.uk.

How To Use This Guide

Luton's Threshold Framework 'Meeting The Needs Of Children, Young People and Their Families In Luton' is an overarching document for the whole of the children and young people's workforce in Luton. This multi-agency threshold framework is a guidance tool that all agencies, professionals and volunteers can use to consider how best to meet the needs of individual children and young people. The majority of children living in Luton have their holistic needs met through support from their own family or carers and by accessing universal services. The local vision is for there to be responsive and flexible support available to meet any additional needs that arise for a child or their family at the earliest opportunity. This support is achieved through working in partnership and with the full consent of the parents or carers, to collectively help to achieve good outcomes for the child.

In Luton we are working to a model of intervention that reflects four levels of need as detailed in the 'Diagram 1 Windscreen Threshold Model' on page 9. The threshold model provides a common continuum of need and has four descriptors for these levels: Universal Need (no unmet needs); Additional Need (can be met by single services); Intensive Need (complex needs) and Specialist Need (safeguarding needs). Guidance on the levels of need and possible service responses are detailed within the tables provided on pages 6 to 24 of this document. The lists are not exhaustive and practitioners should be mindful that individual circumstances for children and young people may not fit neatly into any one specific category. The level of need tables are aimed at providing a quick reference point to support professional practice and are designed to help all practitioners who are working with children and their families to:

- Identify the holistic needs of a child or young person;
- Inform assessments by understanding the needs of the child or young person within the context of their family and community; and
- Act by working with the child, young person, family members carers to develop mutually agreed solutions where additional support can be accessed when it is needed.

Please note that it is not intended that the importance of professional judgment is diminished in any way by the creation of this guidance. Practitioners should continue to make decisions based on their experience, knowledge and practice and seek further advice from their own manager, designated or named safeguarding / child protection lead; Early Help Team, Local Support Team or local Children's Social Care team as appropriate if they are unsure about the most appropriate action to take.

This multi-agency threshold framework guidance provides definitions and indicators for practitioners to assist in the identification of levels of need for children and young people so that the right services can be accessed at the right time and at the earliest opportunity, to help to meet their needs.

This guidance has been developed to reflect the structure of the 'Early Help Assessment' which can be used by all services to provide a comprehensive assessment of need for children and young people. At Level 3, where needs are multiple and complex, the guidance reflects the need to coordinate a multiagency 'Team Around the Family' approach which always needs to be facilitated by a lead professional. A referral can also be made to specialist services at Level 3, in circumstances where there is no risk of actual harm but the needs of the child or young person are acute and require a response from a specialist service. Level 4 describes children with acute and specialist needs where a specialist statutory assessment is required. It is important for practitioners from both the children's and adult workforce to remember that the welfare and safety of the child must remain paramount. Practitioners and managers must note that:

Concerns about a child suffering actual or likely significant harm can occur at any point across the four levels of need and should be responded to by completing a referral to Multi Agency Safeguarding Hub (MASH) of Children Social Care in accordance with LSCB Inter-agency Safeguarding Children Procedures. These procedures can be viewed at http://lutonlscb.org.uk/.

Consent: Whilst professionals should in general discuss any concerns with the child and family and where possible and seek their agreement to making referrals to Luton Children's Social Care Services, this should only be done where such discussion and agreement-seeking will not place the child or others at increased risk of suffering significant harm. Consent is not required for child protection referrals; however you, as the referring professional, would need to inform parents or carers that you are making a referral as stated above, unless by alerting them you could be putting that child or others at risk.

A conceptual model for meeting children and families' needs

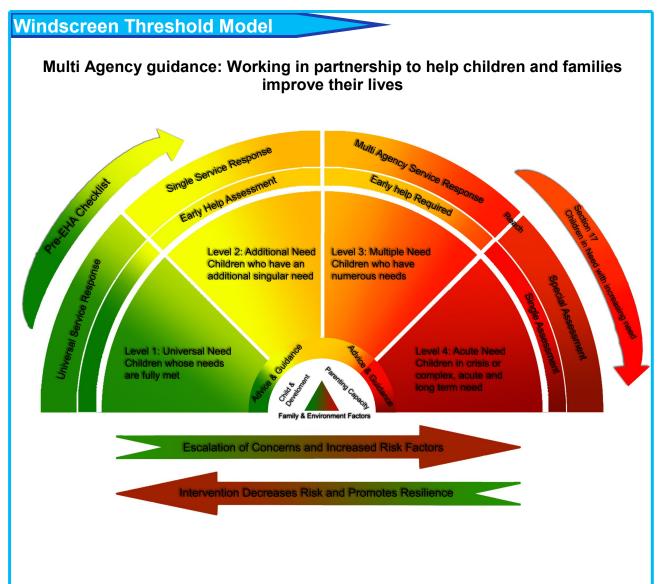
The conceptual model and windscreen is a way of developing a shared understanding and explaining the Luton approach across all our services and partnerships, ensuring a consistent approach is applied by all practitioners and managers. The model illustrates how we will respond to the requirements of children and families across four levels of need *(Universal, Additional, Intensive and Specialist)*. In this model all services and interventions seek to work openly with the family (or with young people on their own where it is age appropriate) in order to support them to address their needs at the lowest possible level. We agree to work with children and families to prevent their needs escalating to a higher level and we will actively seek not to refer to services at a higher level unless and until we have done everything possible to meet needs at the current level.

The Levels of Need table below, the Luton Effective Support Windscreen on page 9, and the more detailed indicators of need set out on pages 10 to 24, together illustrate how Early Help operates in Luton and clarify the threshold between each level. This guidance seeks to give clear advice to all professionals and the public on the levels of need and thresholds for different services and responses in Luton. However we recognise that each child and family member is an individual, each family is unique in its make up and reaching decisions about levels of needs and the best intervention requires discussion, reflection and professional judgement.

Levels and Referral	Needs	Services (examples)	Outcome
Level one Universal Open access to provision. Professionals should consider using the Pre-Early Help As- sessment checklist if progress is not being made with the inter- ventions currently in place or there is a lack of progress in improving the child or young persons outcomes through uni- versal services.	All children and families who live in the area have core needs such as parenting, health and education.	Early years, educa- tion, primary health care (GP), maternity services, housing, community health care, youth centres, leisure services. Children are support- ed by their family and in universal services to meet all of their needs.	Children and young people make good progress in most areas of development.
Level 2 Additional Two or three services work to- gether to meet child and family needs, co-ordinated by a ser- vice that knows the child/family best. An Early Help Assess- ment, Lead Professional and/or Team around the Family meet- ing is recommended at this point. Youth Offending Service - early help	Children and families with additional needs who would benefit from or who require extra help to improve education, parenting and/or behaviour, or to meet specific health or emotional needs or to improve material situation.	Parenting support; school holiday; extra health support for family members; behavioural support; housing support; additional learning support; CAMHS tier 2 support to schools; SEN Support; help to find education and employment; Speech and Language Therapy; YOS Triage assessment; YOS Prevention Pro- gramme	The life chances of children and families will be improved by offering additional support.

Levels and Referral	Needs	Services (examples)	Outcome
Level 2 Additional Two or three services work together to meet child and family needs, co-ordinated by a service that knows the child/family best. An Early Help Assessment, Lead Professional and/or Team around the Family meeting is rec- ommended at this point.		Children's centres; target- ed youth work services provided on a voluntary basis	
Level 3 Intensive Lead Professional, Early Help Team, Team around the Family, Multi- disciplinary/ agency approach. Youth Offending Ser- vice –Out of Court Criminal Disposals	 Vulnerable children and their families with multiple needs or whose needs are more complex, such as children and families who: Exhibit anti-social or challenging or low level criminal behaviour Suffer neglect or poor family relationships Have poor engagement with key services such as school and health Children not attending school regularly, adults out of work and/or risk of financial exclusion Where radicalisation is a concern. 	Because of the complexity of needs, especially around behaviour and parenting, a multidiscipli- nary / agency co-ordinated plan developed with the family is needed, coordi- nated by a lead profes- sional or family (key) worker. A wide range of services might be involved in meet- ing the family's needs. Families needing support to care for a disabled child. Services provided on a voluntary basis. Out of Court criminal dis- posals.	Life chances will be significantly impaired without co-ordinated multi-agency support.
Level 4 Specialist Children's Social Care Child Protection Care Proceedings Hospital in-patient YOS – criminal court orders	 Children and young people who have suffered or are likely to suffer significant harm as a result of abuse or neglect Children with significant impairment of function/learning and/or life limiting illness Have a disability resulting in complex needs Children subject to criminal court orders in the community or in custody 	Children's Social Care Youth Offending Service – Criminal Court Orders Tier 3 & 4 CAMHS In patient and continuing health care Fostering and residential care Health care for children with life limiting illness	Children and /or family members are likely to suffer significant harm/ removal from home/ serious and lasting impairment without the intervention of specialist services, sometimes in a statutory role

Referral	Needs	Services (examples)	Outcome
Level 4 Specialist Children's Social Care Child Protection Care Proceedings Hospital in-patient	 Children whose parents and wider family are una- ble to care for them Families involved in crime/misuse of drugs at a significant level Families with significant mental or physical health needs 	Services for children with profound and enduring disability Referral should be made to services with the power to undertake statutory non- voluntary intervention and services with specialist skills.	



'Stepping up' or 'stepping down' through the levels of need

It is important to note that a child or young person can move throughout the four levels of need as their own needs and circumstances change, and as interventions are put in place to meet those needs. It is not the intention that children and young people are 'labelled' at any level, more that the guide is used for aiding practitioners in making decisions as to what types of service can provide the right help at the right time. Well managed escalation and de-escalation between levels is therefore a critical element of effective multi-agency practice.

Please be aware that this guidance is not comprehensive and more detailed information on all services for children and young people in Luton can be found at 'Luton's Family Information Service' which provides free and friendly information, advice, assistance and sign-posting for all parents, carers and practitioners. To access Luton's Family Information Service please go to: <u>http://www.luton.gov.uk/fis</u>.

This guidance must be used in conjunction with the policies and procedures of the organisation you belong to and in accordance with Luton Safeguarding Children Board's (LSCB) Inter-Agency Procedures at: <u>http://www.lutonlscb.org.uk</u>.

Children and Young People with Universal Needs

Children and young people at this level are achieving expected outcomes. There are no unmet needs or need is low level and can be met by the universal services or with some limited additional advice or guidance. Children / young people, parents and carers can access services directly.

Consider using pre- Early Help Assessment checklist

Child's Developmental Needs

Health

- Health needs are being met by universal services
- Appropriate weight and height / meeting developmental milestones including speech and language
- Physically, psychologically healthy
- Pre-natal health needs are being met
- Up to date immunisations and developmental checks
- Adequate nutritious diet
- Regular dental checks
- Accessing optical care
- No misuse of substances
- Sexual activity / behaviour appropriate to age

Education & Learning

- Achieving key stages and full potential
- Good attendance at nursery / school / college / training
- Demonstrates a range of skills/interests
- No barriers to learning
- Access to play/books
- Enjoys participating in educational activities/schools
- Sound home/school link
- Planned progression beyond statutory education
- PHSE—initiate understanding of agenda

Emotional & Behavioural Development

- Good quality early attachments
- Growing levels of competencies in practical and emotional skills
- Sexual behavior appropriate for age
- Confident in social situations has age appropriate knowledge of the difference
- Able to adapt to change
- Able to demonstrate empathy
- Using technology appropriately i.e. phone, PC

Identity

- Demonstrates feelings of belonging and acceptance
- Positive sense of self and abilities
- Has an ability to express needs verbally and non-verbally

Family and Social Relationships

- Stable and affectionate relationships with caregivers
- Appropriate relationships with siblings
- Positive relationship with peers

Social Presentation

- Appropriate dress for different settings
- Good levels of self-care / personal hygiene

Children and young people at this level are achieving expected outcomes. There are no unmet needs or need is low level and can be met by the universal services or with some limited additional advice or guidance. Children /young people, parents and carers can access services directly.

Child's Developmental Needs

Self-care skills

Age appropriate independent living skills

Parents and Carers

Basic Care

- Child's physical needs are met (food, drink, clothing, medical and dental)
- Carers able to protect children from danger or harm

Emotional Warmth

- The child is shown warm regard, praise and encouragement
- The child has secure relationship which provides consistency of warmth over time
- There may be low level post natal depression

Guidance, Boundaries & Stimulation

- Guidance and boundaries are given that develops appropriate model of value, behaviour and conscience.
- Carers support development through interaction and play to facilitate cognitive development

Family and Environmental Factors

Family History and Functioning

- Good supportive relationship within family (including with separated parents and in times of crisis)
- Good sense of 'family' outside of smaller family unit

Housing, Employment & Finance

- Accommodation has basic amenities/appropriate facilities
- Appropriate levels of hygiene / cleanliness are maintained
- Families affected by low income or unemployment

Family's Social Integration

• The family have social and friendship networks

Community Resources

- Appropriate access to universal and community resources
- Community is generally supportive
- Positive Activities are available

Assessment

The pre-EHA checklist can be used by practitioners to help them decide whether a full-needs assessment is necessary. From this first brief assessment, a decision can be made by the practitioner as to what is then required and whether a full EHA or further specialist assessment is, or is not required. This checklist can be accessed by using the EHA web-page links detailed below:

For full details about Luton EHA and tips on how to conduct a EHA visit the Early Help pages.

Assessment Process:

Children and young people have their needs met through universal services. Universal assessments will apply (such as though provided through health and education services).

Key Universal Services who provide support at this level:

Primary and Secondary Schools, <u>Colleges</u>, <u>Training Providers</u>, <u>Children's Centres</u>, <u>Early Years Settings</u>, <u>Midwifery Service</u>, <u>Health Visiting Service</u> (Healthy Child Programme), <u>School Nursing Service</u>, <u>General</u> <u>Practitioners</u>, <u>NHS 111</u>, <u>Parenting Programmes</u>, <u>Play Services</u>, <u>Youth Service</u>, <u>Police</u>, <u>Housing Ser-</u> <u>vices</u>, <u>Leisure Services</u>, Voluntary and Community Sector.

Children and Young People with Additional Needs

Children and young people at this level are in need of coordinated early help and support from services. The need cannot be met by a universal service/setting alone but can be met by a single service or two or more services using the Early Help Assessment process.

Child's Developmental Needs

Health

- Slow to reach <u>developmental milestones</u>
- Additional health needs
- Missing health checks / routine appointments / <u>Immunisations</u>
- Persistent minor health problems
- Babies with low birth weight i
- Pre-natal health needs
- Issues of poor bonding / attachment
- Minor concerns re healthy weight /diet/ dental health /hygiene / or clothing
- Disability requiring support services
- Concerns about developmental status i.e. speech and language problems
- Signs of deteriorating mental health of child including self-harm
- Starting to have sex (under 16 years)
- Is experimenting with drugs and alcohol
- Concerns for <u>Female Genital Mutilation</u> (FGM)
- Un-safe / inappropriate sexual behavior

Education & Learning

- Is regularly late for school / occasional truanting or significant non attendance/parents condone absences
- Escalating behaviour leading to a risk of exclusion
- Experiences frequent moves between schools;
- Not reaching educational potential or reaching expected levels of attainment
- Needs additional support in school;
- Identified language and communication difficulties
- Few opportunities for play / socialisation
- No participation in education, employment or training post 16 years

Emotional and Behavioural Development

- Low level mental health or emotional issues requiring intervention
- Is withdrawn / unwilling to engage
- Development is compromised by parenting
- Some concern about substance misuse
- Involved in behaviour that is seen as significantly anti-social or on the edge of criminality
- Poor self-esteem
- Child who abuses other (Bullying / Cyber / Sexting / Physical / Emotional)
- <u>Extremist</u> views that potentially places self or others at risk

Identity

- Some insecurities around identity / low self-esteem
- Lack of positive role models
- May experience <u>bullying</u> around perceived difference /bully others
- Disability limits self-care
- <u>A victim of crime</u>
- Peer group issues

Children and young people at this level are in need of coordinated early help and support from services. The need cannot be met by a universal service/setting alone but can be met by a single service or two or more services using the Early Help Assessment process.

Child's Developmental Needs

Family and Social Relationships

- Some support from family and friends
- Some difficulties sustaining relationships
- Undertaking some caring responsibilities
- Child of a teenage parent
- Low parental aspirations

Social Presentation

- Can be over friendly or withdrawn with strangers
- Personal hygiene is becoming problematic
- Appearance indicates poor care and hygiene related health issues
- Persistent presentation in unwashed / unsuitable clothing despite advice and support being offered
- Children who have received a triage assessment following arrest for offending

Self -care skills

- Not always adequate self care / poor hygiene
- Slow to develop age appropriate self care skills
- Over protected/unable to develop independence

Parents and Carers

Basic Care, Safety and Protection

- Basic care not consistently provided e.g. non treatment of minor health problems
- Parents struggle without support or adequate resources e.g. as a result of mental/learning disabilities.
- Professionals beginning to have some concerns about <u>substance misuse</u> (alcohol and drugs) by adults within the home
- Parent or carer may be experiencing parenting difficulties due to mental or physical health difficulties / post natal depression
- Some exposure to dangerous situations in home/community
- Teenage parents /young, inexperienced parents
- Inappropriate expectations of child/young person for age/ability

Emotional Warmth

- Inconsistent parenting but development not significantly impaired
- <u>Post-natal depression</u> affecting parenting ability
- Child / young person perceived to be a problem by parents or carers / experiencing criticism and a lack of warmth

Children and young people at this level are in need of coordinated early help and support from services. The need cannot be met by a universal service/setting alone but can be met by a single service or two or more services using the Early Help Assessment process.

Parents and Carers

Guidance, Boundaries and Stimulation

- May have a number of different carers
- Parent/carer offers inconsistent boundaries e.g. not providing good guidance about inappropriate relationships formed, such as via the internet.
- Can behave in an anti-social way
- Child / young person spends a lot of time alone
- Inconsistent responses to child by parent
- Parents struggle to have their own emotional needs met
- Lack of stimulation impacting on development

Family and Environmental Factors

Family History and Functioning

- Child or young person's relationship with family members not always stable
- Parents have <u>relationship difficulties</u> which affect the child / acrimonious separation or divorce that impacts on child
- Experienced loss of a adult / child
- Caring responsibilities for siblings or parent
- Parents have health difficulties
- Poor home routine
- Child not often exposed to new experiences
- Limited support from family and friends
- Parents or carers are experiencing, on an on-going basis, one or more of the following problems affecting their parenting: <u>mental ill-health</u>, <u>substance dependency</u> or <u>domestic abuse</u> / potential <u>honour based violence / forced marriage</u>
- Child at risk of being involved in radicalisation
- Child at risk of being sexually exploited

Housing, Employment and Finance

- Inadequate/poor housing
- Requiring in-depth guidance and help
- At risk of homelessness
- Child/young person from <u>asylum seeking or refugee family</u> and has identified additional needs
- Children subject to a private care arrangement made by their own family.
- Family affected by low income or unemployment
- Parents find it difficult to find employment due to basic skills or long term difficulties.

Family Social integration

- Family is socially isolated limited extended family support
- Victimization by others impacts on child

Community Resources

- Adequate universal resources but family may have difficulty gaining access to them
- Community characterised by negativity towards child/young person

Assessment

Assessment Process

Additional needs at level 2 can be met within the setting with some identified additional support and universal assessment processes may be sufficient to help the child and their family.

In Luton we have adopted the **Early Help Assessment (EHA)** which is a standardised approach to conducting an holistic assessment of a child's needs and deciding how those needs should be met. It can be used and completed by practitioners working with children, young people, their parents or carers and it is intended to provide a simple and practical tool to enable practitioners to assess needs at an early stage and beyond. The process supports practitioners to work in partnership with parents / carers and provide coordinated multi-agency help and support. It is entirely voluntary and informed consent is mandatory, so families do not have to engage and if they do they can choose what information they want to share.

The EHA is a process whereby practitioners can **identify** a child's or young person's needs early; **assess** those needs holistically using the full EHA Team around the Family (TAF) meeting; **deliver** coordinated services through a co-ordinated EHA action plan overseen by a lead professional; and **review** progress through regular TAF meetings. A lead professional <u>must</u> be nominated to coordinate the EHA and the TAF and the impact of the plan and support should be regularly reviewed.

The pre-EHA checklist can be used by practitioners to help them decide whether a full-needs assessment is necessary. From this first brief assessment, a decision can be made by the practitioner as to what is then required and whether a full EHA or further specialist assessment is, or is not required. This checklist can be accessed by using the EHA web-page links detailed below:

For full details about Luton EHA and tips on how to conduct a EHA visit the Early Help pages.

Key services who provide support at this level:

Primary and Secondary Schools, Colleges, Training Providers, Children's Centres, Early Years Settings, Midwifery Service, Health Visiting Service, School Nursing Service, General Practitioners, NHS 111, Play Services, Youth Service, Police, Housing Services, Leisure Services, Family Support and Parenting Support Services, Voluntary and Community Sector, Prevention Programs, <u>Multi Agency Safeguarding Hub</u> (MASH), Targeted Services, <u>Stronger Families</u> Program via EHA

Children and Young People with Multiple / Complex Needs

Children and Young People at this level have diverse and complex needs and targeted, multi-agency support services are required and are supported by a clear coordinated action plan.

Child's Developmental Needs

Health

- Child/young person who is consistently failing to reach their <u>developmental milestones</u> and concerns exist about their parent's ability to care for them
- Growth falling 2 centile ranges or more, without an apparent health problem
- Learning affected by significant health problems
- Experiencing chronic ill health or diagnosed with a life- limiting illness
- Mental health is deteriorating and there is failure to engage with services / self-harming
- 'Un-safe' / inappropriate sexual behaviour / risk of sexual exploitation
- Problematic substance misuse (drugs and alcohol) / links to risk taking behavior
- Failure to access medical attention for health chronic / reoccurring health needs
- Concerns about diet / hygiene / clothing
- <u>Conception to a child under 16 years old</u> / concerns about parenting capacity
- Disability requiring significant support services to be maintained in mainstream provision
- Likelihood/high-risk of child subject to Female Genital Mutilation

Education and Learning

- Short-term exclusion, persistent truanting or poor school attendance
- Previous permanent exclusions
- Persistent 'Not in Education, Employment or Training' (<u>NEET</u>) / this could be as a result of compromised parenting
- Alienates self from school and peers through extremes of behavior
- No, or acrimonious home/school links
- Statement of Special Educational Needs / Education Health & Care Plan / Failure to cooperate with SEN Support/Resources

Emotional and Behavioural Development

- Alienates self from school and peers through extremes of behavior
- Physical / emotional development raising significant concerns
- Difficulty coping with emotions / unable to display empathy
- unable to connect cause and effect of own actions
- Behaviour is sufficiently extreme to place them at risk of removal from home
- Early onset of sexual activity (13-14 years)
- Puts self or others in danger
- Disappears or is missing from home regularly or for long periods

Identity

- Subject to persistent discrimination
- Is socially isolated and lacks appropriate role models
- <u>Self image</u> is distorted and may demonstrate fear of persecution
- Extremist views that could places self or others and is at risk
- Risk of gang association

Family and Social Relationships

- Relationship with family is experienced as negative, critical or rejecting
- Regularly <u>caring</u> for another family member
- Family no longer want to care for child
- Family is experiencing a crisis likely to result in the breakdown of care arrangements
- Child or young person has previously been looked after by a local authority
- Persistent exposure to violent behaviours within the home
- Risk of <u>radicalisation</u>

Social Presentation

- Appearance reflects poor care and hygiene related health issues
- Persistent presentation in unwashed / unsuitable clothing despite advice and support being offered

Children and Young People with Multiple / Complex Needs

Children and Young People at this level have diverse and complex needs and targeted, multi-agency support services are required and are supported by a clear coordinated action plan.

Child's Developmental Needs

Self-care Skills

- Absence of or poor self-care skills for age / level of understanding
- Severe disability relies on others to meet needs

Parents and Carers

Basic Care, Safety and Protection

- Parent / carer is struggling or is unable to provide adequate care/ basic care's frequently inconsistent
- Child or young person receives erratic or inconsistent care
- Concern about prospective parenting ability, resulting in the need for a pre-birth assessment
- Parents have previous history of struggling to care for child or sibling / children previously subject to a child protection plan / looked after
- Parents experienced abuse in their own childhood
- Parents <u>learning disability</u>, <u>substance misuse</u> (alcohol and drugs) or <u>mental health</u> negatively impacts on parent's ability to meet the needs of the child
- Level of supervision does not provide sufficient protection for a child
- Either or both parents / carers have previously been looked after and their <u>parenting ability</u> is compromised
- Teenage pregnancy or inexperienced young parent or carer with additional concerns
- Teenage pregnancy / young inexperienced parents with additional concerns that could place the unborn child at risk

Emotional Warmth

- Child / young person has multiple carers but no significant relationship to any of them / receives inconsistent care
- Child / young person receives little stimulation / negligible interaction
- Child / young person is scapegoated
- Child / young person is rarely comforted when distressed/ lack of empathy
- Child / young person is under significant pressure to achieve/aspire / experiencing high criticism

Guidance, Boundaries and Stimulation

- Parents struggle to set boundaries / act as good role models
- Child or young person's behaviour out of control
- Child or young person is regularly beyond control of parent or carer
- Parenting impairing emotional or appropriate behavioural development of child / young person
- Parents failing to implement appropriate restrictions on internet use

Family and Environmental Factors

Family History and Functioning

- Parents or carers are experiencing, on an on-going basis, one or more of the following problems significantly affecting their parenting: <u>mental ill-health</u>, <u>substance dependency</u> or <u>domestic abuse</u>/ potential <u>honour based violence</u> / <u>forced marriage</u>
- Parental involvement in crime
- Family characterised by conflict and serious chronic <u>relationship problems</u>
- Parents or carers persistently avoid contact / do not engage with childcare professionals
- Children or young people are subject to a private care arrangement made by their own family
- Children/young people who are privately fostered

Children and Young People with Multiple / Complex Needs

Children and Young People at this level have diverse and complex needs and targeted, multi-agency support services are required and are supported by a clear coordinated action plan.

 Persistent expectation to care for other household members which impacts on the child / young person's development and opportunities

Community Resources

- Parents/carers do not access or there is a lack of available local facilities and/or poor engagement with targeted services to meet assessed needs
- Lack of community support/tolerance or hostility towards the child, young person or family
- Substantial multiple problems preventing a young person from engaging with opportunities

Assessment

Assessment Process:

This smaller group of children and young people require intensive help and support to meet their needs and they may already be known to a service but a multi-agency response is required to meet the child / young person's needs. A coordinated multi- agency 'Team around the Family' EHA approach should be undertaken and the identified lead professional will be responsible for monitoring the child / young person's plan of support. Complex needs can be met by the Early Help Assessment Team (including Stronger Families) in partnership with other involved agencies supporting the child and their family. As stated in additional needs, the EHA supports practitioners to work in partnership and with the full consent of the child / young person, parents and carers, to identify a child / young person's strengths, needs and any potential risk factors. Please note however, that the completion of a EHA must not delay any appropriate referral to a statutory service when it is required.

Early Help (at Level 3) are provided on a voluntary basis to children and families who have been identified as having more complex needs. These services are provided by Early Help Services to children and families whose needs can only be met through multi-disciplinary interventions, requiring coordination via a EHA. Specialist Services (at Level 4) are provided for children and young people with acute needs including those in need of protection and for children who are suffering, or likely to be suffering harm or who are in need of complex interventions to support their family circumstances.

'Stepping Up' - Child in Need of Specialist Support from Children's Social Care Services:

Children and young people with complex, multiple needs may include children who require a qualified social worker assessment to determine whether they are a 'Child in Need' (as defined by section 17 of the Children Act 1989). Section 17 (10) of the Children Act 1989 defines children who are 'in need' as those whose vulnerability is such that they are unlikely to reach or maintain a satisfactory level of health or development, or their health and development will be significantly impaired without the provision of services; and includes children who have a disability. All 'Child in Need' referrals made by professionals must be made with the consent of the child / young person's parent. The critical factors to consider when deciding whether a child is 'in need' are:

What will happen to a child's health or development without services being provided? And, the likely effect that the services will have on the child's standard of health and development.

Children and Young People with Multiple / Complex Needs

Children and Young People at this level have diverse and complex needs and targeted, multi-agency support services are required and are supported by a clear coordinated action plan.

Assessment

Children in the following circumstances may be considered to have complex needs:

- Children who are unlikely to reach or maintain a satisfactory level of health or development, or their health or development will be significantly impaired without the provision of services;
- Children with clearly identified additional or multiple needs but consent to a EHA has been refused so
 that their emotional, developmental and/or physical welfare is being compromised;
- There is a lack of progress in improving the child or young person's outcomes through early intervention services or the EHA process, and the parents or carer is unable or unwilling to engage with services and refuses consent, resulting in the emotional, developmental and/or physical welfare of the child / young person being compromised;
- Children who have previously been the subject of a child protection plan and require ongoing support;
- Children with complex educational needs;
- Children with complex health needs.

In the above circumstances if you are unsure about whether a referral to the Multi Agency Safeguarding Hub (MASH) is needed, you can contact them by telephone and press the option for "referral discussion". This will enable you to have a discussion with an early help practitioner with regards to threshold and the most appropriate action to take. If the decision is a referral to MASH, a referral form will need to be completed with as much detail as possible. In addition to this, parental consent to make the referral must be attempted (unless there is evidence to suggest that a child would be at significant risk of harm by doing so). If parents refuse consent, the referral can still be made. However, the parents need to be informed. Upon receipt of the referral, MASH will undertake further checks with partner agencies and where possible, speak to the parents/ carers of the child. This will then identify if a social work assessment under the Assessment Framework is required or if further supports from other agencies can be offered.

If the decision is made for a social care assessment, the Assessment Team will take case responsibility. The completed assessment will determine the most appropriate outcomes which may be a plan of support and intervention undertaken by social care, or whether the needs of the child or young person can be appropriately met through other services. Parents or carers should be encouraged to access this support to help prevent the child/young person's needs from escalating and leading to the need for statutory intervention.

'Stepping down' from Level 4 to Level 3

A 'Team Around the Family' EHA approach may also be appropriate when there is a de-escalation from level 4 specialist intervention, for example when a child or young person is no longer in need of CSC Services. In these circumstances a new lead professional can be identified from the agencies remaining involved in working with the child and their family, to enable the child / young person and their family to receive continued help and support. The level 4 assessments and plans completed with the family should inform this approach.

Key services who provide support at this level:

SEN Services, Special Schools, CAMHS, Primary and Secondary Schools, Colleges, Training Providers, Children's Centres, Early Years Settings, Midwifery Service, Health Visiting Service, Paediatric Services, Speech and Language Therapy, School Nursing Service, General Practitioners, NHS 111, Play Services, Youth Service, Drug and Alcohol Services, Family Support and Parenting Support Services, Voluntary and Community Sector, Children with Disabilities Services.

Children and Young People with Acute / Specialist Needs

There are a smaller group of children and young people at this level who require intensive help and are in need of specialist support. Children and young people will access specialist services following a statutory assessment. Specialist services include Children's Social Care, the Youth Offending Service, SEN Services and CAMHS. This could be due to safeguarding issues where there is no risk of actual or likely significant harm, but needs are acute and multi-agency plans are not effective; or because there are child protection issues where there is actual or likely significant harm.

For all of the list below refer to the LSCB website 'How to report abuse'

Child's Developmental Needs

Health

- Clear allegation of harm and/or disclosure of harm
- Suffering or at risk of suffering serious physical, emotional or sexual harm or neglect
- Growth faltering and no 'organic' cause identified
- Failure to access medical attention for chronic / reoccurring health problems despite support and advice including severe obesity and dental decay
- Development significantly impaired due to parenting
- Health impaired due to neglectful parenting
- Sexual exploitation / abuse
- Sexual activity under the age of 13
- Conception to a child under the age of 14
- Disability requiring the highest level of support
- Subject to a section under the Mental Health Act / diagnosed mental health issues which places themselves or others at risk
- Self harming likely to have a serious effect on the child or young person's health or wellbeing
- Persistent and significant substance misuse (alcohol and drugs)
- <u>Child or young person is missing</u> from home regularly or for long periods.
- Fabricated / induced illness
- <u>Female Genital Mutilation</u> has happened

Education and Learning

- Permanently excluded from school or at risk of permanent exclusion
- Significant developmental delay due to neglect / poor parenting

Emotional and Behavioural Development

- Puts self or others in danger / including risk taking behaviour / <u>self-harm</u> or <u>suicide attempts</u> / <u>sub-</u> <u>stance misuse</u> of drugs and/or alcohol / <u>eating disorders</u>
- Failure or rejection to address serious (re)offending / anti- social behavior
- Significant emotional / psychological problems as a result of neglect / poor parenting
- Frequently missing from home for long periods placing the child or young person at risk
- Presenting sexualised behavior outside of developmental norm
- Child who abuses others resulting in harm (<u>Bullying / Cyber</u> / Sexting / Physical / Emotional)
- Offending /prosecution for offences resulting in custodial sentences, ASBOs etc
- <u>Extremist</u> views that could places self or others and is at risk

Identity

- Socially isolated and lacking appropriate role models
- Poor self-worth that results in extreme behaviours towards themselves and others
- Participates in gang activity / involved with serious or organised crime
- Demonstrates <u>extremist</u> / radical views or behaviours

Family and Social Relationships

- Child in care (looked after) or care leaver
- Family have abandoned child
- Subject to physical, emotional or sexual abuse / neglect

Children and Young People with Acute / Specialist Needs

There are a smaller group of children and young people at this level who require intensive help and are in need of specialist support. Children and young people will access specialist services following a statutory assessment. Specialist services include Children's Social Care, the Youth Offending Service, SEN Services and CAMHS. This could be due to safeguarding issues where there is no risk of actual or likely significant harm, but needs are acute and multi-agency plans are not effective; or because there are child protection issues where there is actual or likely significant harm.

Child's Developmental Needs

- Adoption breakdown
- Is the main carer for a family member
- Unaccompanied asylum seeking child / young person
- <u>Forced marriage</u> of a child / young person under 18 years

Social Presentation

• Poor / inappropriate self presentation / hygiene related health issues

Self-care Skills

- Absence / neglect of self-care skills due to other priorities such as substance misuse
- Takes inappropriate risks in self-care
- Severe lack of age appropriate behaviour and independent living skills likely to result in harm

Parents and Carers

Basic Care, Safety and Protection

- Parent / carers is unable to provide consistent parenting that is adequate (good enough) and safe
- Parents have seriously abused/neglected the child
- Previous child(ren) has been removed from parent's care
- Parent's own <u>learning difficulties</u> / <u>mental health</u> / <u>substance misuse</u> significantly affects their ability to provide adequate and safe care
- Parents do not recognise or accept danger and protect child/young person from harm
- Persistent use of inappropriate care-givers
- Child / young person has no one to care for them
- There is no relevant stimulation appropriate for age
- Exposed to pornography or other exploitative/ harming material resulting in harm to child
- Consistent instability / violence / domestic abuse within the home
- <u>Teenage pregnancy / young inexperienced parents</u> with additional concerns that could place the unborn child / child at risk of significant harm
- Individuals in family present a risk to children/young people and are likely to be in contact with them
- Child / young person subject to public law proceedings in family court
- Parents / carers involved in criminal activity and the impact
- Significant allegations of harm by a person in a position of trust
- Significant Concern about prospective parenting ability, resulting in the need for a <u>pre-birth assessment</u>
- Private fostering / young carer

Emotional Warmth

- Parents / carers inconsistent, highly critical or apathetic towards child / young person
- Parents / carers are negative and abusive towards the child /young person
- <u>Child / young person is rejected or abandoned</u>
- Carers persistent hostility to the child / young person leads to their isolation

Children and Young People with Acute / Specialist Needs

There are a smaller group of children and young people at this level who require intensive help and are in need of specialist support. Children and young people will access specialist services following a statutory assessment. Specialist services include Children's Social Care, the Youth Offending Service, SEN Services and CAMHS. This could be due to safeguarding issues where there is no risk of actual or likely significant harm, but needs are acute and multi-agency plans are not effective; or because there are child protection issues where there is actual or likely significant harm.

Guidance, Boundaries and Stimulation

- There are no effective boundaries set by parents
- Regularly demonstrates anti-social behaviour in the community
- Child / young person is beyond parental control
- Subject to a parenting order which may be related to their child's criminal / anti-social behaviour or persistent absence from school

Family and Environmental Factors

Family History and Functioning

- Family life is chaotic and there is significant and persistent parental or carer discord /<u>domestic</u> <u>abuse/ honour based violence / forced marriage</u>
- Children or young people are placed with a Connected Person arranged by Children's Social Care Services
- Children/young people who are privately fostered
- Family members have <u>physical or mental health needs</u> which place the child / young person at risk of harm
- Re-occurring / frequent attendances by the police to the family home
- Child / young person is being cared for by a non-relative under private fostering arrangements
- Parents are deceased and there are no family / friends to care for the child / young person
- Parents are in prison and there are no family / friends to care for the child / young person

Housing, Employment and Finance

- Housing accommodation places child / young person in danger / at risk of harm
- No fixed abode / homeless
- Extreme poverty / debt impacting on ability to care for the child / young person
- Household income is used to fund parent or carers own prioritised needs (e.g. <u>substance misuse</u> / <u>gambling</u>) leading to significant neglect of the child / young person

Family's Social Integration

- Family are socially chronically excluded
- Victimisation by others places the child / young person at risk of significant harm

Community Resources

• Substantial multiple problems preventing the family / young person from engaging with services / non engagement with services

Assessment

Assessment Process:

Some children are 'in need' because they have complex, acute or long-term needs or are in need of protection because they are suffering, or likely to suffer significant harm. The Children Act 1989 introduced the concept of significant harm as the threshold that justifies statutory intervention in family life in the best interests of the children or young person. It places a duty on local authorities to make enquiries to decide whether they should take action to safeguard or promote the welfare of a child who is suffering, or likely to suffer, significant harm. Interventions may take the form of enquiries under section 47 of the Children Act 1989, often referred to as 'section 47 child protection investigations'.

These enquiries could lead to the need to convene a child protection conference and result in the child or young person becoming the subject of a child protection plan. In some circumstances legal intervention may also follow.

Children in the following circumstances may be considered to have acute needs:

- Where parents refuse or are consistently not able to cooperate and work with services resulting in the child/ young person's emotional, developmental and/or physical welfare and safety being compromised;
- Parental resistance and lack of support mechanisms which results in children suffering or likely to be suffering significant harm;
- Children who have serious unmet enduring health, development and/or learning needs;
- Where there is reasonable cause to suspect that a child may have suffered or is likely to suffer significant harm;
- Children who are the subject of a child protection plan;
- Children who are 'looked after' by the local authority/are care leavers;
- Children with complex disabilities or complex health needs;
- Children diagnosed with significant mental health difficulties;
- Serious and persistent young offenders who have received a court sentence requiring intervention by the Youth Justice Service;
- A child is living in circumstances where maltreatment is resulting in a lack of safe and effective care or an impairment of their health and development.

In these circumstances an immediate referral should be made to the Multi Agency Safeguarding Hub (MASH) in Children's Social Care. Practitioners in any doubt should seek advice from their line manager; their own agencies designated or named child protection lead; or from the Multi Agency Safeguarding Hub (MASH) in Children's Social Care.

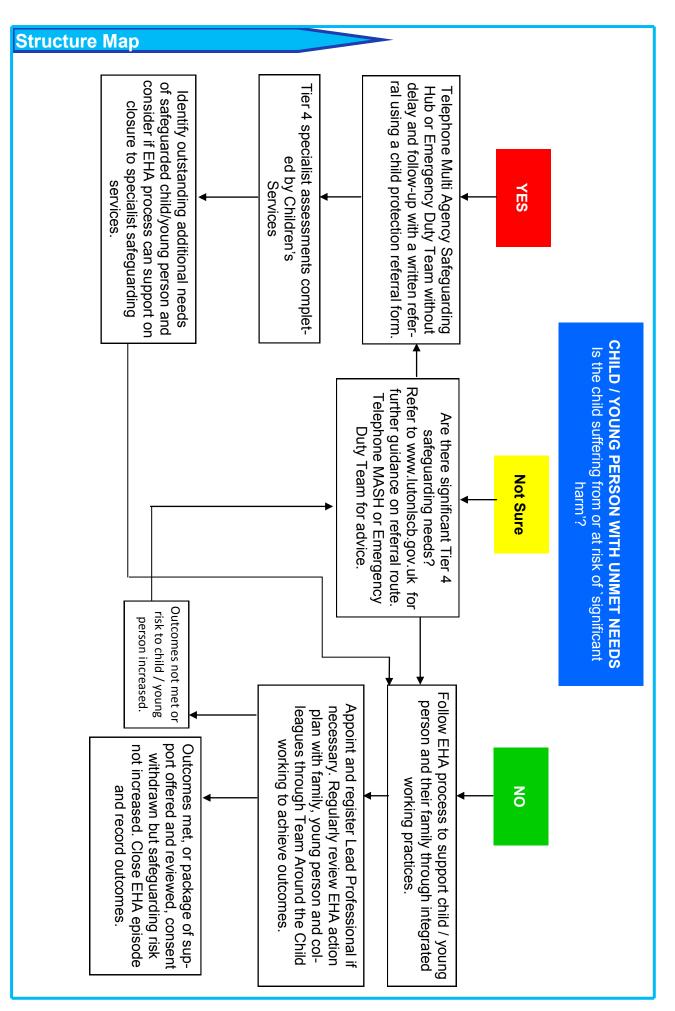
Key services who provide support at this level:

<u>Children's Social Care, CAMHS</u>, specialist Health Services, <u>Children with Disabilities Services</u>, <u>Education</u> <u>Services</u>, <u>Parenting Programmes</u>, <u>Substance Misuse Services</u>, <u>Youth Offending Service</u>, working in partnership with a range of other services including the voluntary and community sector.

Meeting The Needs of Children

The 'Meeting the Needs of Children, Young People and their Families in Luton' - Thresholds for Intervention Level of Need Table' in Appendix 1 below can be used by practitioners and managers as a quick reference guide to the levels 1 to 4; the type of response to the need; advice on the pathway to take; and the expected outcome from the pathway.

Level of Need	<u>Type of Response</u> <u>to Need</u>	Pathway to take	Expected outcome from pathway
Level 1: Universal needs	There are no unmet needs or need is low level and can be met by the universal ser- vice/setting alone or with some additional advice, guidance or consultation.	Take action to address the need and where necessary seek advice, guidance or consultation from a relevant service to guide you on how to address the need.	Action is taken by the universal service/setting and progress is monitored
Level 2: Additional needs	The need cannot be met by a universal service/setting alone but can be met by a single service or one group of single ser- vices acting with the universal service/ setting.	Use the indicator guide or Pre-Early Help Assessment check list as an aide-memoire to help you identify the need and service response. Make direct contact with the service that is required (e.g. Educational Wel- fare for school attendance, SEN team for education support).	The single service, working alongside the universal service/ setting, implements the support and re- views its impact regu- larly
Level 3: Multiple needs	The needs are com- plex and diverse and require a team of different services involved addressing them; as such a mul- ti-agency response with a clear co- ordinated action plan is needed.	Initiate a Early Help following the local guidance	A team of profession- als are identified to support the needs of the child and/or fami- ly, a TAF meetings takes place, a Lead Professional is nomi- nated, a clear multi agency plan is put in place and the impact of support is regularly reviewed.
Level 4 Acute/Specialist Needs (safeguarding) including Children In Need (s17 children act)	There is actual or likely significant harm and a child needs to be referred to Multi Agency Safeguarding Hub (RAIT) or the Police.	Multi Agency Safeguarding Hub, Luton Beds Police Station Out of hours: 0300 300 8123 Tel: 01582 547653 email: mash@luton.gcsx.gov.uk	Safeguarding procedures and assessments are initiated by a qualified so- cial worker.



Appendix 5

Managing Professional Disagreements

Disagreements over the handling of concerns can impact negatively on positive working relationships and consequently on the ability to safeguard and promote the welfare of children. All agencies are responsible for ensuring that their staff are supported and know how to appropriately escalate inter-agency concerns and disagreements about a child or young persons well being. For more information please refer to the LSCB Escalation procedure on the LSCB website at: www.lutonlscb.org.uk

Glossary

CAMHS	Children and Adolescent Mental Health Service
CSC	Children's Social Care
EHA	Early Help Assessment
EHC	Education Health and Care
FGM	Female Genital Mutilation
LSCB	Luton Safeguarding Children's Board
MARF	Multi-Agency Referral Form
NEET	Not in Employment, Education or Training
PHSE	Personal Health and Social Education
MASH	Multi Agency Safeguarding Hub
SEN	Special Educational Needs
TAF	Team Around the Family
YOS	Youth Offending Service