Thresholds of NeedDocument2018



Introduction

Access to services

The purpose of this guidance, which is for practitioners in all agencies working with children, is to assist in decision making about which agency should be involved in helping families have different levels of need. It has been endorsed by the Northumberland Safeguarding Children Board (NSCB) and should be used to help practitioners make decisions about which agency to refer to and when. The tables in this document give examples of what we might expect to see in families receiving services at different levels of need. The examples are neither exhaustive nor rigid in their application, they are for guidance and should be used to enhance professional judgments and discussion about individual children and families.

This threshold guide sits within the overall framework for dealing with children in need as outlined in the Northumberland Safeguarding Children Procedures Manual which is published and updated by the Northumberland Safeguarding Children Board. It should be used alongside the unborn thresholds guide

http://northumberlandlscb.proceduresonline.com/pdfs/unborn _thresholds.pdf

These procedures are more detailed and provide practice guidance about expectations for safeguarding practice across Northumberland and between organisations. for more information go to

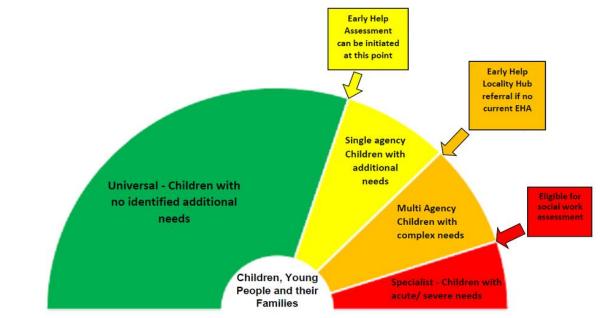
www.northumberland.gov.uk/Children/safeguarding.aspx

Access routes to early help and social work services provided in Northumberland are outlined below. It should be emphasised that these routes are not only for referral but also for consultation and advice if practitioners are unsure if a threshold is met for a referral or not.

In an emergency always ring 999 and ask for the Police. To contact Children's Social care in Northumberland, use the numbers listed on page 11 of this document.

Children's Needs and Multi-Agency Tiers of Intervention

Northumberland have adopted a common approach to describing the levels of need and the intervention that may be required by children, young people and their families. These form a continuum as follows:



The example indicators in this document provide illustrative examples about how need may present itself rather than an exhaustive list of fixed criteria that must be met. The level of need will always be increased by the multiplicity of factors

Features of each level

Universal children and young people with no additional needs

All children use universal services which include schools, health care including health visitors, GPs, housing, and other easily accessed services. At this level, children would be expected to do well with minimum intervention from any additional services.

Features

Child with no additional needs

Children whose developmental needs are met by universal services Key universal services that may provide support at this level;

Education, early years, health, dentists, housing, youth services, leisure facilities and services provided by voluntary organisations

Single agency children and young people with additional needs

Children and young people with additional needs may need extra support from a single agency to help them achieve their outcomes and to make good progress. Their identified needs may relate to their health, educational or social development. Ensuring that children and their families get the right help and support when there are concerns that they may not be keeping up with or developing at the expected rate is important not just to put things right, but because it might mean there are other problems or needs that people have not realised.

Services may include;

Children's Centres Youth Offending team (YOT) Domestic Violence services Drug and alcohol services Health visiting and Public Health School Nurses Voluntary and Community sector Children's and Young Peoples Service Inclusion Support Service

Multi-agency children and young people with

complex needs

At this level children and young people and their families will need additional help to prevent problems escalating and becoming more difficult to resolve. The help may come from specialist school staff, health services, children's centres or early help teams in the local authority through a referral to your Locality Hub.

FEATURES

These children may require extra support in order to promote their welfare and wellbeing and to prevent their needs from becoming more complex or acute. Key agencies that may provide support at this level,

Educational establishments, Locality Early Help Family Work Teams, Northumberland Adolescent Service Team, Children's Centre staff, Health Visitor Service, School Health Staff, Primary Mental Health, Children's and Young People's Service, Adult Services, Housing Services, Educational Psychology

Specialist children and young people with acute/severe needs

Children and families at this level will be facing complex problems which will require an integrated and coordinated response. Children at this level, often described as children 'in need' may be seen to be at risk and without support their development will be impaired. A number of agencies may be involved to help families at this level including: local authority early help or children's social care; youth offending services; children's centres; Children and Young People's Services (CYPS); health services including health visitors, GPs and mental health services; specialist school staff; family coaches.

Children at this level will be at risk of harm and may be subject to child protection enquiries, taken into the care of the local authority or need specialist mental health intervention. Children's social work services will take the lead in safeguarding children and coordinating services for children at this level. The agencies involved might include any of those working with children at all levels.

Features

Children with acute/severe needs

These children require integrated targeted support, without which their health (physical and emotional) and development may be significantly impaired.

Child in need:

These children may be eligible for a child in need service from children's social work services and are at risk of moving to a high level of risk if they do not receive early intervention. These may include children who have been assessed as 'high risk' in the recent past, or children who have been adopted and now require additional support. If a social worker is allocated they will act as the Key Worker.

FEATURES

Child Protection

Child experiencing or at risk of experiencing significant harm

These children require specialist/ statutory integrated support. Children at this level would require statutory interventions such as child protection investigations or legal interventions in order to safeguard and promote their welfare. These children may also need to be accommodated by the local authority either on a voluntary basis or by way of Court Order.

Key agencies that may provide support at this level,

Youth Offending Service, Children's Social care, Mental Health and Substance Misuse Services.

Support may also be offered by other agencies detailed from Single agency and multi-agency sections.

Child development factors	Family and environmental factors
Learning and education	Family, history and well-being
 Achieving age related expectations 	 Stable and supportive family relationships
 Good attendance at school, college and training 	Housing, employment and finance
Health	Child fully supported financially
 Good physical health and emotional wellbeing 	Suitable housing
 Registered with a GP and a dentist 	Social and community resources
 Developmental checks/immunisations up to date 	Good social and friendship networks
 Health appointments are kept 	Safe and secure environment
 Adequate diet/hygiene/clothing 	Access to positive activities
Social, emotional, behavioural and identity	Parenting factors
 Positive and safe relationships with peers 	
 Secure early attachments are formed, child is confident in social situations 	Basic care, safety and protection
 Responds appropriately to boundaries and guidance 	 Parents able to meet child's physical needs
 Positive sense of self and abilities 	• Parent protects from danger or significant harm in the home and elsewhere
 Knowledgeable about the effects of crime and antisocial behaviour (age appropriate) 	Emotional warmth and stability
 Involved in leisure and other social activity 	 Parents or carers provide secure and caring parenting
	Guidance, boundaries and stimulation
Family and social relationships	
 Stable family where care givers are able to meet the child's needs 	Parents provide appropriate guidance and boundaries to help child develop
 Good relationship with siblings and peers 	holistically
	 Facilitates cognitive development through interaction and play
Self-care and independence	
 Growing level of competencies in practical and emotional skills (e.g. feeding, 	
dressing, developing age appropriate independent living skills)	
 Good level of personal hygiene 	
 Able to discriminate between 'safe' and 'unsafe' contacts 	
 Gaining confidence and skills to undertake activities away from the family 	

Single agency children and young people with additional needs

Child development factors	Family and Social relationships and Family Well-Being
 Learning/Education Poor school or early years' attendance/punctuality Behaviour likely to lead to risk of exclusion Identified learning needs – SEN Support plan Identified language and communication difficulties linked to other unmet needs Gaps in schooling/learning due to pregnancy No access to early education No access to employment (including work based learning) Limited access to resources for learning at home, e.g. books/ toys Not always engaged in learning – poor concentration, low motivation and interest Health Slow in reaching developmental milestones Concern re diet/hygiene/clothing Not being brought for routine appointments e.g. immunisations and developmental checks Sexualised behaviour: for further definition see https://www.brook.org.uk/our-work/the-sexual-behaviours-traffic-light-tool Weight is significantly above or below what would be expected Starting to not attend appointments across health including antenatal, hospital and GP appointments Encopresis (soiling and wetting) Low level mental health or emotional issues, for example anxiety linked to exams" Low level substance misuse Accident & Emergency attendance giving cause for concern, for example causing staff to question the level of supervision being given" 	 Parents/Carers have relationship difficulties or there is frequent conflict which may affect the child Parents/Carers request advice to manage their child's behaviour Sibling with significant problem (health, disability, behaviour) Risk of domestic abuse Parental physical/mental health issues Low level substance misuse Family has limited support from wider family and/or friends Child is a young carer Housing, Employment and Finance Inadequate/poor/overcrowded housing Families affected by low income/debt//living with poverty affecting access to appropriate services to meet child's additional needs Family seeking asylum or refugees Social Integration and Community Resources Experiencing harassment/discrimination Socially or physically isolated Lack of a support network Insufficient facilities to meet social Integration needs e.g. advice/support needed to access services for disabled child where parent is coping otherwise Child associating with peers who are involved in anti-social or criminal behaviour Family demonstrating low level anti-social behaviour towards others

Single agency children and young people with additional needs (Continued)

Social, Emotional, Behavioural, Identity

- Disruptive/challenging behaviour including in school or early years setting
- Emerging anti-social behaviour and attitudes and/or low level offending.

Parenting Factors

Basic Care, Safety and Protection

- Requiring advice/support on parenting issues e.g. safe and appropriate childcare arrangements; safe home conditions
- Professionals beginning to have concerns about child's physical needs being met
- Parental stresses starting to affect ability to ensure child's safety
- Poor supervision and attention to safety issues

Emotional Warmth and Stability

- Inconsistent responses to child by parents
- Difficult parent/child relationship
- Starting to demonstrate difficulties with attachment
- Lack of response to concerns raised about child's welfare

Guidance Boundaries and Stimulation

- Parents offer inconsistent boundaries
- Behaviour problems not recognised and addressed by parents
- Lack of response to concerns raised about child
- Lack of appropriate parental guidance and boundaries for child's stage of development and maturity

Child development factors	Family and environmental factors
 Learning and education Occasional truanting or non-attendance, poor punctuality, poor links between home and school and child is not supported to reach educational potential Developmental delay Few or no qualifications or NEET (Not in Education, Employment or Training) Mild learning or behavioural difficulties emerging, poor concentration, lack of interest in education and other school activities Health Slow in reaching developmental milestones Missing immunisation or checks, minor concerns regarding health, diet, hygiene and clothing Social, emotional, behavioural and identity Mild or specific learning disability Low level mental health or emotional issues requiring Difficulties with peer group, family or other relationships Early onset of sexual activity Young person missing from home: repeated incidents Vulnerable to emotional problems in response to life events such as parental separation or bereavement Low self-esteem, lack of confidence, suffering from anxiety or withdrawn. Can be overly friendly or withdrawn with strangers Difficulties in expressing empathy, understanding impact of action on others or taking responsibility for actions Victim or perpetrator of bullying or discrimination Early sexual activity (under 13/14 years) for further definition see https://www.brook.org.uk/our-work/the-sexual-behaviours-traffic-light-tool Experimentation with tobacco, alcohol or illegal drugs Early onset of offending behaviour or activity and coming to the notice of the police because of this behaviour (10 – 14 years). Self-care and independence Lack of age appropriate independent living skills that increase vulnerability to social exclusion 	 Housing, employment and finance Overcrowding Families affected by low income or unemployment Family and social relationships Parents or carers have relationship difficulties which affect the child Parents request advice to manage their child's behaviour Child affected by difficult family relationships or bullying Parent or carer has physical or mental health difficulties that may affect the child Child is a young carer Social and community resources Insufficient facilities to meet need e.g. transport or access issues Family requires advice regarding social exclusion Family has limited support or is new to the area Child is associating with anti-social or criminally active peers Limited access to contraceptive or and sexual health advice, information and services
	 Basic care, safety and protection Inconsistent care (inappropriate child care arrangements or young inexperienced parent Parental learning disability, parental substance misuse or mental health which may be impacting on parent's ability to meet the needs of the child Domestic Violence thresholds and risk should be considered using the safe lives matrix http://www.safelives.org.uk/practice-support/resources-identifying-risk-victims-face Emotional warmth and stability Inconsistent parenting including emotional availability but development not significantly impaired Post-natal depression or persistent low mood which affects the child Guidance, boundaries and stimulation Parents have inconsistent boundaries or lack of routine in the home Lack of response to concerns raised regarding child History of parenting difficulties with siblings, e.g. exclusion from school, involvement in substance misuse

Learning/education Family and environmental factors • Chronic or poor nursery/school attendance/punctuality/ poor home and nursery or school link/ho parental support for education. Family and environmental factors • Education, Health and Care Plan or on-going difficulty with learning and development. • Privately fostered children • Severe and complex learning difficulties requiring residential educational provision • Child has poor relationship with extended family/no support network. • Parents or cares do complex learning difficulties requiring residential educational provision • Childran who need to be looked after outside of their own family. • Developmental milestones are unlikely to be met/concerns about weight, dental decay, and language development delays. • Child ness some chronic/recurring health problems: not treated or badly managed/missed appointments • Parents or cares have been assessed as intentionally homeless/homeless unaccompanied minors • Serious physical and emotional health problems. Refusing medical care placing child's health and development at significant risk. • Young person aged 16/17 presents an lomeless • Parsistent and high risk substance misuse/dangerous sexual activity and/or early sexual activity (under 13/14 years) for further definition see https://www.brook.org.uk/our-work/the-sexual-behaviours-traffic-light-tool • Family with alack of access to finance and living in extreme poverty • Self-care and independence • Severe lack of age appropriate independent living skills likely to impair development • Child or family at	Child development factors	Family and environmental factors
or lead to alienation from peers	 Chronic or poor nursery/school attendance/punctuality/ poor home and nursery or school link/no parental support for education. Education, Health and Care Plan or on-going difficulty with learning and development. Severe and complex learning difficulties requiring residential educational provision Health Developmental milestones are unlikely to be met/concerns about weight, dental decay, and language development delays. Child has some chronic/recurring health problems: not treated or badly managed/missed appointments Teenage pregnancy or parent Serious physical and emotional health problems. Refusing medical care placing child's health and development at significant risk. Persistent and high risk substance misuse/dangerous sexual activity and/or early teenage pregnancy/sexual exploitation/ sexual abuse/self-harming. Early sexual activity (under 13/14 years) for further definition see <u>https://www.brook.org.uk/our-work/the-sexual-behaviours-traffic-light-tool</u> Non-accidental injury, bruising on immobile baby Female genital mutilation/Breast Ironing Self-care and independence Severe lack of age appropriate independent living skills likely to result in significant harm e.g. bullying, isolation, inappropriate self-presentation. 	 Privately fostered children Family has poor relationship with extended family/no support network. Parents are unable to care for the child. Suspicion of physical, emotional, sexual abuse or neglect. Children who need to be looked after outside of their own family. Housing, employment and finance Housing conditions impacting directly on children, including severe overcrowding Parents or carers have been assessed as intentionally homeless/homeless unaccompanied minors Extreme poverty impacting directly on welfare of children. Young person aged 16/17 presents as homeless No fixed abode or homeless or imminently homeless/housing conditions are posing a serious threat to the welfare. Family with a lack of access to finance and living in extreme poverty

Specialist children and young people with acute/severe needs (Continued)

Social, emotional, behavioural and identity	Parenting factors
Mental health issues emerging requiring specialist intervention	Basic care, safety and protection
 Disability requiring specialist support to be maintained in mainstream setting Disruptive/challenging/high risk behaviour at school, home or in the neighbourhood which is unresponsive to earlier interventions (e.g. running 	 Physical care or supervisions of child is inadequate. Parental learning disability, substance misuse, mental health or lifestyle which is impacting on parent's ability to meet the needs of the child.
 away, underage sex, problematic and escalating drug use). Concerns regarding behaviour development and the development of appropriate social skills. 	 Domestic Violence thresholds and risk should be considered using the safe lives matrix <u>http://www.safelives.org.uk/practice-support/resources-identifying-risk-victims-face</u> Little or no improvement in parenting despite professional interventions.
 Repeated incidents of missing from home, care or school 	 Parents are believed to have caused physical injury to a child.
Subject to or at risk of physical, emotional or sexual abuse or neglect.	Chronic and serious domestic violence directly or indirectly involving a child.
 Severe emotional/behavioural challenges resulting in serious risk to the child and others. 	 Where previous children placed at risk by parents' actions. Parental non-compliance.
Goes missing for long periods of time or on a frequent basis.	Parents involved in crime unable to restrict access to home by dangerous adults. Children and Viewer Results at rick of Region lighting and Viewer Research access to home by dangerous adults.
 Victim of sexual abuse, exploitation and underage sex which is considered abusive. 	 Children and Young People at risk of Radicalisation and Violent Extremism see <u>http://northumberlandlscb.proceduresonline.com/chapters/p_safeg_viol.html</u>
 Sexual exploitation of a child/young person including prostitution/ forced involvement in sexual activity. 	
Forced marriage of a child.	Emotional warmth and stability
Challenging behaviour resulting in serious risk to the child or others.	 Inconsistent parenting impairing emotional or behavioural development
 Complex mental health issues requiring specialist intervention including in- patient treatment. 	 Evidence of emotionally abusive relationships placing child's development at significant risk.
Failure or rejection to address serious (re)offending behaviour, as well as	Guidance, boundaries and stimulation
being part of a gang.	 An absence of effective parental boundaries placing child's development
 Young person experiencing current harm through their use of substances 	at significant risk.
 Violence towards parents or carers follow APVA guidance 	Child beyond parental/carer's control/offending/has no one to look after them.

Assessment process

Universal children and young people with no additional needs	Children should access universal services in a normal way using each service's referral process.
Single agency children and young people with additional needs	An Early Help assessment (EHA) could be completed with the child/family to identify their strengths and needs and to support future information sharing. The action plan should identify the child's needs, access appropriate services and interventions to meet those needs.
Multi-agency children and young people with complex	All referrals in relation to children and young people where it is thought that they might need extra help will be referred to the relevant locality hub using the hub referral form.
needs	The only exception to this is immediate safeguarding concerns which need to be referred following Local Safeguarding Procedures to the First Contact or the Police or if there is an Early Help Assessment already in place when the lead professional should invite any additional organisations or services required to give support to a Team Around the Family meeting. (the Early Help Coordinators can provide advice about who the most appropriate organisations/services might be) All referrals will be checked by the Early Help Co-ordinator then shared with the triage team on a weekly basis. Any referrals needing an immediate response from a service will be contacted by the most appropriate service. All other referrals will be discussed at the Locality Hub which meets fortnightly/three weekly. Then the next step is for the appropriate agency to undertake the work that is being requested by the referrer, and offer the support that is needed to the children, young people and family, putting an Early Help Assessment in place
Specialist children and young people with acute/severe needs	Agencies and individuals should make a referral to the First Contact immediately. (contact details on page 11) Children's Social Care will decide on their response following the referral. In the case of suspected abuse, they will follow the Working Together 2015 procedures as laid out in Northumberland Safeguarding Children Procedures. On the basis of a Section 47 enquiry and Single Assessment, a decision will be made whether to hold an Initial Child Protection Conference.

Worried about a child - report your concerns

Emergency: If a child is in immediate danger or left alone, you should contact the police or call an ambulance on 999. Non-emergency: If there is no immediate danger or you need advice or information, you should contact the following numbers:

If this is a new referral then please ring:-One Call : 01670 536400

or

send a written referral to: first.contact@northumberland.gov.uk

Early Help Assessments

To make a referral to the Early Help Hubs please send your referral to :-<u>earlyinterventionhub@northumberland.gov.uk</u>

For enquiries about completion or registrations of Early Help Assessments please contact: 01670 536400