

## Appendix 1 – Level of Needs Descriptors

### Doncaster Safeguarding Children Partnership Levels of Need Descriptors



**These indicators are meant as a guide and clearly rely on professional analysis and interpretation. If you are in doubt about whether the child's circumstances are at level 3 or 4 you can ask for case mapping with an Early Help coordinator or a consultation with a social worker.**

<b>Level 1 – Universal – Addressing children’s, young people’s and families’ needs via universal services</b>	<b>Description:</b> <b>Children, young people and families whose needs are being met through mainstream universal services. 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.</b>	<b>Guidance</b>
<p>Children with no additional needs and children who may from time to time require additional support that can be met within universal services.</p>	<p><b>Development needs</b></p> <p><b>Health</b></p> <ul style="list-style-type: none"> <li>• Good physical health with age appropriate development, including speech and language</li> <li>• Meeting developmental milestones</li> <li>• Adequate diet, hygiene and clothing</li> <li>• Developmental checks/ immunisations up to date</li> <li>• Regular dental / optical care</li> <li>• Health appointments kept</li> </ul> <p><b>Learning/education</b></p> <ul style="list-style-type: none"> <li>• General development is age appropriate</li> <li>• Access to books and toys, play</li> <li>• Achieving education key stages</li> <li>• Good attendance at school/college/training</li> <li>• Planned progression beyond statutory school age</li> <li>• Child / young person home schooled and no concerns</li> </ul> <p><b>Social and emotional presentation/ behaviour/ identity</b></p> <ul style="list-style-type: none"> <li>• Feelings/ actions demonstrate appropriate responses</li> <li>• Ability to express needs</li> </ul> <p><b>Self-care and independence</b></p> <ul style="list-style-type: none"> <li>• Age appropriate/ independent living skills</li> <li>•</li> </ul> <p><b>Family and environmental factors</b></p> <p><b>Family and social relationships</b></p> <ul style="list-style-type: none"> <li>• Stable families where parents are able to meet the child’s needs</li> <li>• Good relationships with siblings</li> <li>• Positive relationships with peers</li> <li>• Supportive family relationships even when parents are separated</li> </ul>	<p>Children should access universal services in a normal way. These are services which are accessible by all children and families.</p> <p><b>Key agencies that are involved at this level:</b>            Education            Family Hub            0 – 19 Healthy Child Service            Midwifery            School nursing            GP            Police            Housing            Early years childcare settings            Schools (including SEN/ pastoral support)            Online counselling services            Parenting groups            Adult mental health            Parenting Team            SALT            Sexual health services            Dentist            Ophthalmic services            DSCT Counselling Services            Audiology Services</p>

	<ul style="list-style-type: none"> <li>• Absent parent</li> <li>• Few significant changes in family composition</li> <li>• Sense of larger familial network/ good friendships outside the family network</li> <li>• Sense of associates and how they support</li> </ul>	<p>The Family Information Service has knowledge of services able to offer support to children and their families including information about Family Hub, activities for children and young people, information on local voluntary services as well as details of childcare support available in the local area.</p>
<p><b>Housing, employment and finance</b></p> <ul style="list-style-type: none"> <li>• Child fully supported financially</li> <li>• Good quality stable housing/amenities</li> <li>• Parents able to manage working/ unemployed</li> <li>• Reasonable income over time and resources used appropriately to meet child’s needs</li> </ul>		
<p><b>Social and community resources</b></p> <ul style="list-style-type: none"> <li>• Good social and friendship networks exist</li> <li>• Family integrated into the community</li> <li>• Safe and secure environment</li> <li>• Access to consistent and positive activities</li> <li>• Good universal services in the neighbourhood</li> <li>•</li> </ul>		
<p><b>Parents and carers</b></p>		
<p><b>Basic care, safety and protection</b></p> <ul style="list-style-type: none"> <li>• Parents able to provide care for child’s needs e.g. food, drink, clothing, medical and dental care</li> <li>• Protect from danger elements or significant harm in the home/ elsewhere</li> <li>• Restrict/ monitors internet access appropriately</li> </ul>		
<p><b>Emotional warmth &amp; stability</b></p> <ul style="list-style-type: none"> <li>• Parents provide secure and caring parenting – praise and encouragement</li> <li>• Ensures that sense of belonging is not disrupted</li> <li>• Ensure that the child access education available to them</li> </ul>		
<p><b>Guidance boundaries and stimulation</b></p> <ul style="list-style-type: none"> <li>• Parents provide guidance and boundaries to help child develop appropriate values</li> <li>• Enables and encourages the child to reach his/ her potential</li> </ul>		

Level 2: Features - Additional / Emerging needs (Level 2)	Additional / emerging needs (Level 2)– example indicators Children and families with some emerging needs may require support of another service alongside universal provision to prevent an escalation of needs. A <b>Family Early Help Assessment</b> may be appropriate for some children at this level	Guidance
<p>Children and families with additional needs who would benefit from or who require extra help to improve education, parenting and/or behaviours, or to meet specific health or emotional needs, or to improve material situation.</p> <p>May require multi-agency intervention. Lead professional and Team around the Family (TAF).</p> <p>Children with additional needs are best supported by those that already work with them such as Family Hub and schools organising additional support with local partners as needed.</p> <p>The purpose of this intervention is to address these needs and prevent them escalating to a level that requires targeted services.</p> <p><b>Consent required:</b> The clear expectation is that all professionals will discuss their concerns openly and honestly with the child, where appropriate, and their parents or carers/ those with parental responsibility. Except where to do so might place the child or another person</p>	<p><b>Development needs</b></p> <p><b>Health</b></p> <ul style="list-style-type: none"> <li>● Slow in reaching development milestones</li> <li>● Overdue immunisations or health checks</li> <li>● Minor health problems</li> <li>● Inadequate diet e.g. no breakfast, being under/overweight</li> <li>● Inadequate general hygiene</li> <li>● Missed some antenatal appointments</li> <li>● Dental problems and untreated decay – poor dental hygiene</li> <li>● Bedwetting or soiling</li> <li>● Experiment with tobacco, alcohol and illegal drugs</li> <li>● Parent has undergone FGM procedure, but risk assessment undertaken by health professionals identifies there isn't a perceived risk of the child being subject to the procedure</li> <li>● Concern of self-harm (including substance misuse)</li> <li>● Parent has physical or mental health issues and is requesting support</li> <li>● Changes in presentation, mood or behaviour, expressed by others or by the child themselves</li> <li>● Hygiene has some effect on child's personal presentation</li> </ul> <p><b>Learning/education</b></p> <ul style="list-style-type: none"> <li>● Limited access to books, toys, the internet or educational materials</li> <li>● Poor stimulation</li> <li>● Identified language and communication difficulties</li> <li>● SEN support at school level</li> <li>● Some learning or disability needs that require support</li> <li>● Occasional truanting or non-attendance and poor punctuality</li> <li>● Persistent late arrival</li> <li>● Pattern of school absences</li> <li>● Not always engaged in learning – poor concentration, low motivation and interest</li> <li>● Not reaching full educational potential</li> <li>● Some fixed term exclusions or reduced timetable</li> </ul>	<p>One or two services work together to meet child and family needs, coordinated by a service that knows the child/family best.</p> <p>A family early help assessment should be completed to gain a full understanding of the family's needs, A Team around the Family (TAF) convened and a plan agreed with the family, agreeing clear outcomes to be achieved and progress regularly reviewed.</p> <p>Level 2 Early Help – If the level of need has changed and you need to step up to Level 3 to offer a multi-agency response and a Team Around the Family, please consult with your Early Help Coordinator to initiate the steps on Mosaic, or make a referral to MASH if the family are not open on the Early Help Pathway. All Level 3 cases should be held on the agreed case management system, following the agreed Early Help Pathway.</p> <p><b>Key agencies that may provide support at this level:</b> Portage School nursing</p>

<p>at likelihood/ immediate risk of harm. Where this is the case, consent to refer concerns is not required and contact should be made with the Multi Agency Safeguarding Hub and followed up in writing or in an emergency contact the police on 999.</p>	<ul style="list-style-type: none"> <li>● Few or no qualifications</li> <li>● Some emerging concerns for a child/ young person being home schooled</li> </ul> <p><b>Social and emotional presentation, behaviour, identity</b></p> <ul style="list-style-type: none"> <li>● Difficulty making and sustaining relationships with peers and with family</li> <li>● Social isolation</li> <li>● Lack of positive role models</li> <li>● Exhibits antisocial/anti - authoritarian behaviour</li> <li>● Low level mental health or emotional issues requiring intervention</li> <li>● Children involved in bullying/may experience bullying or low-level cyber bullying</li> <li>● Child at times not able to show empathy</li> <li>● Early onset of sexual activity or at risk of early pregnancy</li> <li>● Lack of confidence/low self-esteem which affects behaviour and development</li> <li>● Child subject to persistent discrimination</li> <li>● Emerging concerns in relation to sense of belonging</li> <li>● Low level concern about child being radicalised or exposed to extremism</li> <li>● Resistance to boundaries and adult guidance</li> <li>● Exhibits aggressive challenging behaviour</li> <li>● Some evidence of inappropriate responses and actions by child</li> <li>● Unsure or unable to disclose sexual orientation</li> <li>● Some insecurities around identity expressed</li> <li>● Finds it difficult to cope with anger, frustration or upset</li> </ul> <p><b>Self-care and independence</b></p> <ul style="list-style-type: none"> <li>● Lack of age appropriate self-care skills and independent living skills that increase vulnerability.</li> </ul> <p><b>Family and environmental factors</b></p> <p><b>Family and social relationships and family wellbeing</b></p> <ul style="list-style-type: none"> <li>● Conflict between parents/ family members where police have been called</li> <li>● Parents/carers have relationship difficulties which affect the child</li> <li>● Parent struggles to regulate emotions</li> <li>● Child has some caring responsibilities</li> <li>● Family is socially isolated</li> <li>● Multiple changes of address</li> <li>● Low level inter-sibling violence and aggression</li> <li>● Unresolved issues arising from parents' separation and family reconstitution or bereavement</li> </ul>	<p>Early years childcaresettings Housing Family Wellbeing Service DAN DAC Freedom Project Young carers Adult mental health Young Women’s Resource Project Education Family Hub PAFSS Parenting Team 0 – 19 Healthy ChildService Midwifery School nursing GP Police Housing DSCT Counselling Services Voluntary and communityservices Schools (including SEN/pastoral support) Online counselling services Parenting groups Adult mental health SALT Sexual health services Dentist Ophthalmic services Audiology Services</p>
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	<ul style="list-style-type: none"> <li>• Family history of criminal gang involvement</li> <li>• Child to adult abuse</li> <li>• Some support from friends and family</li> </ul>	
	<p><b>Housing, employment and finance</b></p> <ul style="list-style-type: none"> <li>• Overcrowding in poor housing conditions</li> <li>• Housing arrangements are temporary or unsecure</li> <li>• Unsecure or unknown immigration status</li> <li>• Financial pressures</li> <li>• Low income</li> </ul>	
	<p><b>Social and community resources</b></p> <ul style="list-style-type: none"> <li>• Families are victim of hate crime</li> <li>• Poor access to leisure and recreational amenities and activities</li> <li>• Associating with anti-social or criminally active peers</li> <li>• Risk of gang involvement or vulnerability to gang activity/exploitation</li> <li>• Some social exclusion experiences</li> <li>• Negative influences from peer groups or friends</li> <li>• Marginalised from the community</li> </ul>	
	<p><b>Parents and Carers</b></p>	
	<p><b>Basic care, safety and protection</b></p> <ul style="list-style-type: none"> <li>• Inappropriate childcare arrangements</li> <li>• Low level concerns about parental alcohol or substance use</li> <li>• Young or inexperienced parents</li> <li>• Requires advice on parenting issues</li> <li>• Professionals are beginning to have some concern about the child's needs being met</li> <li>• Parental decision/ stressors have some impact on the child's safety</li> <li>• Some exposure to dangerous situation in or outside the family home including online violent and /or extremist websites or influences</li> <li>• Child is left at home alone for a short period and this has not compromised his/ her safety(consider age and vulnerability)</li> </ul>	
	<p><b>Emotional warmth and stability</b></p> <ul style="list-style-type: none"> <li>• Inconsistent parenting, but development not significantly impaired</li> <li>• Inconsistent responses to child/young person</li> <li>• Failure to pick up on the child's emotional cues</li> </ul>	

	<ul style="list-style-type: none"><li>• Parents ability to cope with needs of disabled child – requesting support</li><li>• Key relationships with family not always maintained</li><li>• Unstable family environment</li></ul>	
	<ul style="list-style-type: none"><li>• <b>Guidance, boundaries and stimulation</b></li><li>• Lack of routine and inconsistent boundaries</li><li>• Poor supervision within the home</li><li>• Anti-social behaviour in neighbourhood</li><li>• Parents failing to challenge any inappropriate viewpoint</li><li>• Low level physical chastisement that does not cause physical injury</li><li>• Inappropriate parental chastisement e.g. puts child in stress positions</li><li>• Threatening and frightening behaviour towards the child</li></ul>	

<p><b>Level 3: Children with complex multiple needs</b></p>	<p><b>Description:</b>  <b>Children requiring Level 3 services are children with high level additional unmet needs and those with complex needs likely to require longer term targeted intervention from statutory and/or specialist services.</b></p> <p><b>At Level 3, there is likely to be a combination of factors which will require careful information gathering and sound assessment and analysis to ensure that the services offered to children and families meet need and prevent further escalation of risk in their circumstances.</b>  <i>Some children/young people, depending of level of risk and vulnerability may require a service from children's social care to prevent moving into a high level of risk.</i></p>	<p><b>Guidance</b></p> <p><b>A Lead Practitioner will complete a whole family assessment (Early Help Assessment), a family plan and chair a multi-agency Team Around the Family Meeting ensuring the needs of the family are met.</b></p> <p><b>If a social worker is allocated, they will act as Lead Practitioner.</b></p>
<p>Children and families with complex needs requiring integrated targeted support or a statutory child in need assessment.</p> <p>Because of the complexity of needs, especially around behaviour and parenting, a multidisciplinary/agency coordinated plan developed with the family is needed, coordinated by a lead professional.</p> <p>Vulnerable children and their families with multiple needs or whose needs are more complex, such as children and families who: have a disability resulting in complex needs, exhibit antisocial or challenging behaviour, suffer neglect or poor family relationships, have poor engagement with key services such as schools and health, are not in education or work</p>	<p><b>Development needs</b></p> <p><b>Health</b></p> <ul style="list-style-type: none"> <li>• Child has some chronic/recurring health problems or a disability; requiring some support to manage ; may include some cases of perplexing presentations</li> <li>• Developmental milestones unlikely / not being met due to parental care and where parent want support</li> <li>• Inappropriate sexualised or personal behaviour</li> <li>• Hygiene problems impacting on the child's presentation and health</li> <li>• Regular substance misuse</li> <li>• Missing routine appointments</li> <li>• Increasing concern regarding the child's diet or development</li> <li>• Unsafe sexual activity and/or STIs</li> <li>• Emerging self-harming behaviours</li> <li>• Sexual harmful behaviours</li> <li>• The impact on mental well-being is having a direct impact on day to day life</li> <li>• Some emerging concern regarding unborn baby and mother attending antenatal services inconsistently</li> <li>• History of Female Genital Mutilation (FGM) in family</li> <li>• Some episodes of suicide thoughts</li> <li>• Growing professional concern about fabricated and induced illness and some perplexing presentations but there is no current evidence of significant harm</li> <li>• Teenage pregnancy - consider and age/ maturity/ consent and social circumstances</li> <li>• Children with a disability who require support would be met via S17, this includes care packages of support being explored.</li> </ul> <p><b>Learning/education</b></p>	<p>Where practitioners identify that a child and their family would benefit from a more intensive multidisciplinary response than they can provide, they should discuss this with the family and complete a family early help assessment.</p> <p>Professionals are advised not to delay starting the Early Help Assessment and should speak to a member of the Early Help Team for advice.</p> <p>The early help assessment needs to identify the child's and family's needs and develop a SMART plan to address these.</p> <p>A Team around the Family (TAF) is to be convened and a lead professional to be identified. There is an expectation that the Team around the Family (TAF) will have worked intensively together to meet the</p>



<p>long term.</p> <p>The object of the work of the Team around the Family (TAF) isto enable the family to have their needs met within the universal and additional services tier.</p> <p><b>Where the Team around the Family (TAF) has attempted to work with the family but several unmet needs remain, which are impacting on the child’s health or development, or further escalation and risk is identified, these children may require intervention from children’s social care (Sec 17 CA89)</b></p> <p><b>Children may require social care support to meet complex needs such as those children with severe and profound disability.</b></p> <p><b>Consent at this level is required.</b></p>	<ul style="list-style-type: none"> <li>• Short term exclusions or at risk of permanent exclusion, persistent truanting</li> <li>• Poor school attendance and punctuality</li> <li>• Not engaged in education or reaching education potential</li> <li>• Children who are home schooled where there are concerns that their educational needs are not being consistently met and parent requesting support</li> <li>• Parent does not engage with school and actively resists support</li> <li>• Special Education Needs (SEN) school support or EHCP</li> <li>• No access to books, toys, internet or educational materials and inadequate stimulation leading to developmental concerns</li> <li>• NEET (Not in Education, Employment or Training)</li> <li>• Children who are home schooled where there are significant concerns that thechild’s educational needs are not being met</li> </ul> <p><b>Social and emotional presentation, behaviour, identity</b></p> <ul style="list-style-type: none"> <li>• Child under 18 is pregnant where there are significant social family concerns</li> <li>• Low or medium level indicators of CSE (please see CSE risk assessment guidance and strategy)</li> <li>• Starting to commit offences and reoffend</li> <li>• Disruptive / challenging behaviours at school or in the neighbourhood</li> <li>• Lack of empathy</li> <li>• Child is engaging in cyber activity that potentially places others or themselves at risk of harm</li> <li>• Evidence of regular/frequent drug use which may be combined with other risk factors</li> <li>• Concerns regarding peer croups</li> <li>• Concerns regarding Criminal exploitation</li> <li>• Evidence of gang affiliation and gang related activities – need, harm and risk beyond the family</li> <li>• Concern about child being radicalised or exposed to extremism</li> <li>• Parental mental health/physical needs showing signs of impact on the care of the child</li> <li>• Escalating level of concern of low self-esteem and confidence affecting emotional presentation, behaviour and identity</li> <li>• Subject to discrimination e.g. racial, sexual orientation or disabilities</li> <li>• Sudden display of unexplained gifts / clothing</li> <li>• Lack of positive role models</li> <li>• Regular care for a sibling or another family members</li> <li>• Parental Conflict and/or alienation which is impacting on the child’s wellbeing</li> <li>• Allegations of child on child sexual harmful behaviour</li> <li>• Child under 16 but over 13 and is pregnant where there are significant social family concerns</li> </ul>	<p>additional needs of the child and the family.</p> <p>Level 3 Early Help – if you feel the level of risk is escalating to the point that statutory social care involvement is needed (S17 of the CA89), please use the following <b>step up</b> process:</p> <p>Doncaster Council/DCST staff - speak with the your Line Manager, for management oversight of level of need and risk. If met, your Line Manager will have a conversation with the DCST Assessment Team Manager about the level of need and risk to identify next steps, which may include a <b>step up</b> to a social worker.</p> <p>External staff - speak with your Early Help Coordinator who will undertake case mapping with you to identify level of need and risk. If met, they will then arrange for a conversation with the DCST Assessment Team Manager to discuss the level of need and risk to identify next steps, which may include a <b>step up</b> to a social worker (S17 of the CA89).</p> <p>Level 3 – Child in Need - these children have an allocated social worker. If the level of risk escalates, procedures under sec47 CA89 will be followed and / or legal intervention sought.</p> <p>As level of need and risk reduces,</p>
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	<ul style="list-style-type: none"> <li>• Complex mental health issues requiring specialist interventions</li> <li>• Poor and inappropriate self-presentation</li> <li>• Family breakdown relating to child’s behaviour difficulties and risk of child entering care</li> <li>• Subject to peer/ gang culture and pressure</li> <li>• Persistent but unsubstantiated concerns about physical, emotional or sexualabuse and neglect</li> </ul>	<p>children, young people and families will <b>step down</b> the continuum of need.</p> <p><b>If you feel that the level of risk is such that the child has suffered or is at imminent risk of harm, you should not wait to follow a step up process and instead call:</b></p> <p><b>South Yorkshire Police 999</b></p> <p><b>Multi Agency Safeguarding Hub (MASH) on 01302 – 737777 (office hours)</b></p> <p><b>Emergency Social Services Team -ESST on 01302 – 796000 (out of office hours)</b></p> <p><b>Key agencies that may provide support at thislevel:</b></p> <p>Portage  School nursing  Early years childcare settings  Housing  Family Wellbeing service  DAC  DAN  Freedom Project  IDVA  Probation  Young carers  Adult mental health  Young Women’s Resource Project</p>
	<p><b>Self-care and independence</b></p> <ul style="list-style-type: none"> <li>• Lack of age appropriate behaviour and independent living skills, likely to impair development or compromise safety</li> <li>• Pre – occupation with the internet</li> <li>• Lack of friends of the same age</li> </ul>	
	<p><b>Family and environmental factors</b></p>	
	<p><b>Family and social relationships and family wellbeing</b></p> <ul style="list-style-type: none"> <li>• Emerging pattern of parental conflict</li> <li>• Verbal Abuse/ arguments / parental conflict</li> <li>• Poor family support</li> <li>• Risk of relationship breakdown leading to child possibly becoming looked after</li> <li>• Parental illness or disability affecting ability to provide basic care</li> <li>• Concerns about inter-sibling violence and aggression which does not result in significant emotional or physical harm</li> <li>• Unhelpful involvement from extended family</li> <li>• Multiple change of addresses starting to affect the child/ young person’s wellbeing</li> </ul>	
	<p><b>Housing, employment and finance</b></p> <ul style="list-style-type: none"> <li>• Unsuitable accommodation</li> <li>• Intentionally homeless or living in a hostel (family)</li> <li>• Families financial resources impact on child’s basic physical needs being met</li> <li>• Poor state of repair, hoarding, lack of cleanliness</li> <li>• Parents experience stress due to unemployment or over working</li> <li>• Parent find it difficult to obtain employment due to poor / basic skills</li> <li>• Serious debt/ poverty impacts on ability to meet the child’s basic needs</li> <li>• No recourse to public funds (immigration)</li> <li>• Families financial resources starting to compromise child’s basic physical needs being met/their general wellbeing</li> <li>• Clear evidence that a family is destitute and homeless</li> </ul>	

	<ul style="list-style-type: none"> <li>• Inappropriate / unsafe accommodation - health and safety concerns</li> <li>• Chronic unemployment severely affecting parents own identify and therefore impacting on the child</li> <li>• Extreme poverty/ debt/ gambling /substance abuse impacting on parent’s ability to care for the child</li> </ul> <p><b>Social and community resources</b></p> <ul style="list-style-type: none"> <li>• Family require support services as a result of social exclusion</li> <li>• Parents socially excluded, no access to local facilities</li> <li>• Access difficulty to community resources and targeted services</li> <li>• Imminent risk of parental/carer and child relationship breakdown with risk of child entering care</li> <li>• Child is young carer and this is significantly impacting on their development and welfare</li> <li>• Parental illness or disability resulting in inability to provide basic care leading to neglect of the child’s needs</li> <li>• Concerns about inter-sibling violence and aggression which does result in significant emotional or physical harm and is not managed by the parent</li> <li>• Child is privately fostered - Child under 16 years (or 18 if the child has a disability) (S.66 Children Act 1989) is placed for 28 days or more in the care of someone who is not the child's parent(s) or a 'connected person'</li> <li>• There is nobody with parental responsibility to ensure the child’s long term wellbeing and stability of care</li> <li>• Requests from prisons for a prisoner to have a contact with a child</li> </ul> <p><b>Parents and carers</b></p> <p><b>Basic care, safety and protection</b></p> <ul style="list-style-type: none"> <li>• Patterns are emerging that the child is left at home alone, but this does not seriously place them at significant risk (consider age and vulnerability)</li> <li>• Previously child in care by another local authority / Doncaster</li> <li>• Professionals are concerned about parental mental health, learning difficulties, drug and alcohol misuse that may impact on ability to care if no coordinated response</li> <li>• Inappropriate childcare arrangements which are consistently prejudicing the child’s safety and welfare</li> <li>• Health and safety hazards in the home</li> <li>• Parent not actively preventing the child’s exposure to potentially unsafe situations</li> <li>• Parents mental health or substance misuse seriously compromises the health, welfare and safety of the child, including unborn child</li> <li>• Parent has a history of being unable to care for previous children</li> </ul>	<p>SALT  PAFSS  Parenting Team  Education  Family Hub  0 – 19 Healthy Child Service  Midwifery  School nursing  GP  Police  Housing  DSCT Counselling Services  Voluntary and community services  Schools (including SEN/pastoral support)  Online counselling services  Parenting groups  Adult mental health  Sexual health services  Dentist  Ophthalmic services  Audiology Services  Children’s social care</p>
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	<ul style="list-style-type: none"> <li>• Parent has a severe physical or learning difficulty that compromises their ability to meet their child's basic needs</li> </ul>	
	<p><b>Emotional warmth and stability</b></p> <ul style="list-style-type: none"> <li>• Inconsistent/ erratic parenting impacting emotional or behavioural development</li> <li>• Episodes of poor quality of care</li> <li>• Have no other positive relationships</li> <li>• Multiple carers</li> <li>• Parent is unresponsive or fails to recognise child's emotional needs</li> <li>• Parent ignores child or is consistently inappropriate in responding to child</li> <li>• Parents ability to cope with needs of disabled child is affected and requesting support</li> </ul>	
	<p><b>Guidance boundaries and stimulation</b></p> <ul style="list-style-type: none"> <li>• Parent provides inconsistent boundaries or responses</li> <li>• Parent not offering good role model</li> <li>• Parents enforcing unrealistic boundaries and guidance</li> <li>• No restrictions imposed re access to extreme groups</li> <li>• Child not receiving positive stimulation with lack of new experiences or activities</li> <li>• Deliberating restricting access to positive experiences</li> <li>• Child/ parent persistently behaves in an anti-social way in the neighbourhood</li> </ul>	

Level 4: Safeguarding / Specialist Needs	Safeguarding / Specialist Needs Example Indicators: A comprehensive statutory assessment will be required. Specialist services are required where the needs of the child have been significantly compromised, they are suffering significant harm or impairment and statutory and/or specialist intervention is required to keep them safe.	Guidance
<p><b>Children who are at risk of significant harm</b> which require a child protection response or legal intervention.</p> <p><b>Children who need to be accommodated</b> by the local authority either on a voluntary basis or by way of a Court Order.</p> <p>Parent has had a child/children <b>previously subject to a Child Protection Plan or Care proceedings (if presenting concerns have continued)</b></p>	<p><b>Development Needs</b></p>	<p><b>Immediate safeguarding concerns/child protection</b></p> <p>If a child is at risk of physical, emotional, sexual abuse, or neglect, refer to MASH</p> <p>Where an immediate response is required because of the child's physical / medical health dial 999 for an ambulance.</p> <p>Where a child's safety is at immediate risk contact the police by dialling 999.</p> <p>After any immediate protective action has been taken you need to speak in person to Children's Social Care. If this incident occurs out of hours contact ESST.</p> <p><b>Key agencies that may provide support at this level:</b></p> <p>Children's Social Care Youth Offending Team CAMHS Prevent Probation</p>
	<p><b>Health</b></p> <ul style="list-style-type: none"> <li>Evidence of Neglect, Emotional Abuse, Physical Harm, and/or Sexual abuse</li> <li>Serious physical and emotional health concerns that are consistently not addressed by the parent e.g. failure to thrive, seriously obese/underweight, serious dental decay, persistent and high risk substance misuse, child sexual exploitation and specific physical or medical conditions which require specialist interventions</li> <li>Acute mental health problems which require specialist interventions</li> <li>Concern about serious unexplained injury</li> <li>Health concerns and the parent intentionally does not engage with health professionals</li> <li>Children is engaged in sexual activity and aged 13 or below (statutory rape)</li> <li>Persistent presentation to professionals with injuries: Raising concerns about child safety/ parental behaviour</li> <li>Child is at serious risk of Female Genital Mutilation (FGM) / travel arrangements, seeking doctor, seeking finance for procedure</li> <li>Professional concern about fabricated and induced illness and there is evidence of significant harm</li> <li>Small baby/non mobile child bruising</li> <li>Parent has been victim to Female Genital Mutilation (FGM) procedure but risk of child being subject to procedure is unknown and needs to be further assessed within partnership</li> </ul>	
	<p><b>Learning / Education</b></p> <ul style="list-style-type: none"> <li>Failure to stimulate and no interest in the child/ young person's education / learning</li> </ul> <p><b>Social and Emotional presentation, Behaviour and Identity</b></p> <ul style="list-style-type: none"> <li>Serious persistent offending behaviour attributable to neglectful absent parenting</li> <li>Evidence of the child being sexually exploited (based on risk assessment evidence)</li> <li>Safety and welfare seriously compromised by gang involvement (criminal exploitation)</li> <li>Frequently go missing from home for long periods which seriously compromises the child's safety and wellbeing</li> <li>Child emotional health and physical safety is compromised by exposure to radicalisation and extremist ideology</li> <li>Child is engaging in cyber activity that places them at risk of harm from others and is not managed</li> </ul>	

	<p>by the parent</p> <ul style="list-style-type: none"> <li>• Prosecution of offences resulting in court orders/ remand in Local Authority care</li> <li>• Persistent but unsubstantiated concerns about physical, emotional or sexual abuse and neglect</li> </ul> <p><b>Family &amp; Environmental Factors</b></p> <p><b>Housing, Employment &amp; Finance</b></p> <ul style="list-style-type: none"> <li>• Clear evidence that a 16/17-year-old is destitute and homeless</li> <li>• Deliberate avoidance of authority and safeguarding intervention by professionals impacting on the child / young person</li> <li>• Who lives in a household in which a registered sex offender or convicted violent offender subject to MAPPA resides.</li> </ul> <p><b>Social &amp; Community Resources</b></p> <ul style="list-style-type: none"> <li>• Escalation of levels of domestic abuse that put the child at risk of serious harm</li> <li>• There are indicators that a child/young person is at risk of honour based violence or forced marriage</li> <li>• There are indicators of engagement in terrorist activity, concerns a child may be being radicalised</li> <li>• Child is subjected to physical, emotional, sexual abuse or neglect including peer on peer exploitation</li> <li>• Unaccompanied minors</li> <li>• Trafficked children</li> <li>• Family member is known to be a significant risk to children</li> </ul> <p><b>Parents and Carers</b></p> <p><b>Basic Care, Safety and Protection</b></p> <ul style="list-style-type: none"> <li>• Parent has a history of being unable to care for previous children and legal action is likely required</li> <li>• Parental disclosure of serious harm to the child</li> <li>• Parent is unable to assess and manage serious risk to the child from others within their family and social network, which has placed the child at risk</li> </ul> <p><b>Emotional Warmth &amp; Stability</b></p> <ul style="list-style-type: none"> <li>• Inconsistent, highly critical and apathetic parenting significantly impairing emotional or behavioural development</li> <li>• Family breakdown and parent/ carer not willing or able to care for the child/young person any longer – requesting the child/ young person to be accommodated by the Local Authority.</li> <li>• Evidence of child being groomed – parents no longer able to safeguard</li> </ul> <p><b>Guidance Boundaries &amp; Stimulation</b></p> <ul style="list-style-type: none"> <li>• Consistent lack of effective boundaries set by the parent leading to risk of serious harm to the child</li> </ul>	
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## Governance

<b>Version Governance</b>	<b>Sign off Date</b>
New Version 1 updated	December 2021
MASH Group	December 2021
Improvement board sign off – recommended approval of the documents to the Chief Officer Group	14/12/2021
DSCP sign off – recommended approval of the documents to the Chief Officer Group	15/12/2021
COSOG sign off	11/01/2022