



**Staffordshire's Threshold Framework:
*'Accessing the Right Help at the Right Time'***

**Multi-agency Guidance on the Access Criteria
to help support Children, Young People and Families
in Staffordshire.**

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Introduction

Welcome to Staffordshire'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 Common Assessment Framework tools; the multi-agency referral form (MARF) to make a referral to Children's Social Care services; and guidance on making a referral, are all available on the Staffordshire Safeguarding Children Board (SSCB) website at www.staffsscb.org.uk.

How to use this Guidance

Staffordshire's Threshold Framework 'Accessing the Right Help at the Right Time' is an overarching document for the whole of the children and young people's workforce in Staffordshire. 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 Staffordshire 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 Staffordshire 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 5. 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); Multiple Need (complex needs) and Acute Need (specialist or safeguarding needs.) Guidance on the levels of need and possible service responses are detailed within the tables provided on pages 6 to 14 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; CAF lead, 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. Further guidance on Accessing Families First Services Early Intervention/Family Support can be viewed by using the following link: [Families First - Getting Early Help in Staffordshire](#).

This guidance has been developed to reflect the structure of the 'Common Assessment Framework' which can be used by all services to provide a standard holistic assessment for children and young people. At Level 3, where needs are multiple and complex, the guidance reflects the need to coordinate a multi-agency 'Team Around the Child/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 First Response in Staffordshire's Multi-agency Safeguarding Hub (MASH), in accordance with SSCB Inter-agency Safeguarding Children Procedures. These procedures can be viewed at; www.staffsscb.org.uk/procedures

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 Staffordshire 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.

With the exception of child protection, referrals will not be accepted by the First Response Service in the MASH without parental consent being provided. If consent has not been sought or provided, the reason for this should be shared at the time of the referral being made.

'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 Staffordshire can be found at 'Staffordshire's Family Information Service' which provides free and friendly information, advice, assistance and sign-posting for all parents, carers and practitioners. To access Staffordshire's Family Information Services please go to:

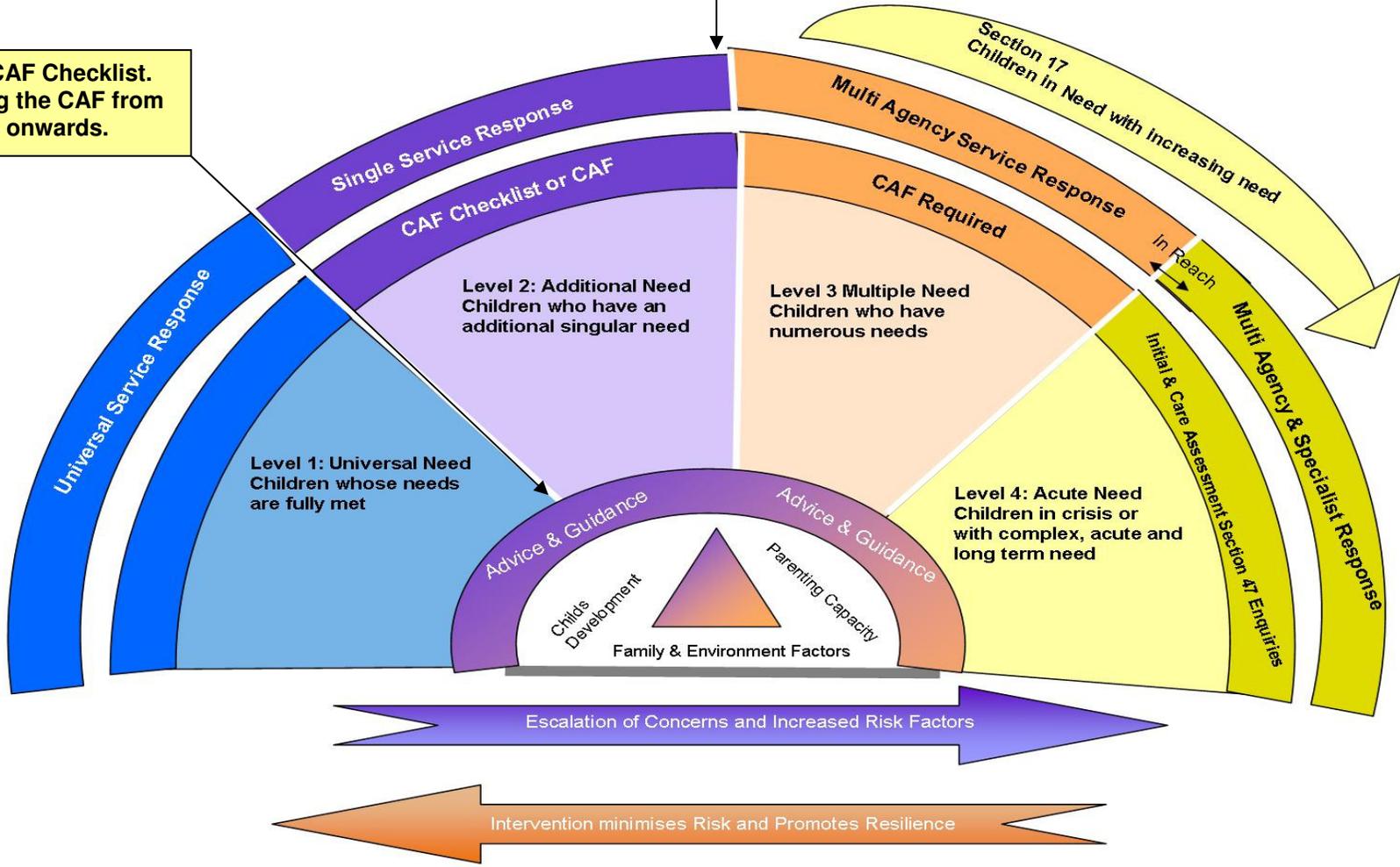
<http://www.staffordshire.gov.uk/education/childcare/families/homepage.aspx>

This guidance must be used in conjunction with the policies and procedures of the organisation you belong to **and** in accordance with Staffordshire Safeguarding Children Board's (SSCB) Inter-Agency Procedures at: www.staffsscb.org.uk.

Diagram 1: Windscreen Threshold Model

A CAF should always be used by agencies from this point -
 Please note however, that the completion of a CAF must not delay any appropriate referral to a statutory service when it is required.

Use the Pre-CAF Checklist. Consider using the CAF from this point onwards.



Level 1: 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.

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

Emotional & Behavioural Development

- Good quality early attachments
- Growing levels of competencies in practical and emotional skills
- Sexual behaviour appropriate for age
- Confident in social situations – has age appropriate knowledge of the difference
- Able to adapt to change
- Able to demonstrate empathy

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

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 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:

Schools, Colleges, Training Providers, Children's Centres, Early Years Settings, Midwifery Service, Health Visiting Service (Healthy Child Programme), School Nursing Service, General Practitioners, NHS Direct, Parenting Programmes, Play Services, Youth Service, Police, Housing Services, Leisure Services, Voluntary and Community Sector.

Level 2: 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 one group of single services using the CAF assessment process.

Child's Developmental Needs

Health

- Slow to reach developmental milestones
- Additional health needs
- Missing health checks / routine appointments/immunisations
- Persistent minor health problems
- Babies with low birth weight in proportion to the mother
- 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

Education & Learning

- Is regularly unpunctual 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 anti-social
- Poor self-esteem

Identity

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

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

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 substance misuse (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
- Post-natal depression affecting parenting ability
- Child / young person perceived to be a problem by parents or carers / experiencing criticism and a lack of warmth

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 relationship difficulties which affect the child / acrimonious separation or divorce that impacts on child
- Experienced loss of a significant 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

Housing, Employment and Finance

- Can be over friendly or withdrawn with strangers
- Personal hygiene is becoming problematic

Self –care skills

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

- Inadequate/poor housing
- Requiring in-depth guidance and help.
- At risk of homelessness
- Child/young person from asylum seeking or refugee family and has identified additional needs;
- Children subject to kinship care arrangements 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
- Victimisation 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 Process

Additional needs at this level 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 Staffordshire we have adopted the **Common Assessment Framework (CAF)** 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 CAF is a process whereby practitioners can **identify** a child's or young person's needs early; **assess** those needs holistically using the full CAF assessment and Team around the Family (TAF) meeting; **deliver** coordinated services through a co-ordinated CAF action plan overseen by a lead professional; and **review** progress through regular TAF meetings. A lead professional must be a nominated to coordinate the CAF and the TAF and the impact of the plan and support should be regularly reviewed.

The pre-CAF 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 CAF assessment or further specialist assessment is, or is not required. This checklist can be accessed by using the CAF web-page links detailed below:

For full details about Staffordshire CAF and tips on how to conduct a CAF visit

<http://www.staffscb.org.uk/professionals/caf/professionals/forms/>

For on-line CAF awareness training the CAF please complete the on-line booking form at

www.staffscb.org.uk/professionals/Inter-Agencytraining/e-learning/Booking

Key services who provide support at this level:

Schools, Colleges, Training Providers, Children's Centres, Early Years Settings, Midwifery Service, Health Visiting Service, School Nursing Service, General Practitioners, NHS Direct, Play Services, Youth Service, Police, Housing Services, Leisure Services, Family Support and Parenting Support Services, Voluntary and Community Sector, Prevention Programmes, Local Support Teams, Targeted Services.

LEVEL 3: 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 co-ordinated action plan.

Child's Developmental Needs

Health

- Child/young person who is consistently failing to reach their developmental milestones 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 behaviour
- Failure to access medical attention for health chronic / reoccurring health needs
- Concerns about diet / hygiene / clothing
- Conception to a child under 16 years old / concerns about parenting capacity
- Disability requiring significant support services to be maintained in mainstream provision

Education and Learning

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

Emotional and Behavioural Development

- Alienates self from school and peers through extremes of behaviour
- 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)
- Offending /prosecution for offences – resulting in custodial sentences, ASBOs etc
- 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
- Self image is distorted and may demonstrate fear of persecution

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
- Significant 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 learning disability, substance misuse (alcohol and drugs) or mental health 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 parenting ability is compromised
- Private fostering / young carer
- Teenage pregnancy or inexperienced young parent or carer with additional concerns

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

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: mental ill-health, substance dependency or domestic abuse/ potential honour based violence / forced marriage
- Parental involvement in crime
- Family characterised by conflict and serious chronic relationship problems
- Parents or carers persistently avoid contact / do not engage with childcare professionals
- Children or young people are subject to Kinship Care arrangements set up by Children's Social Care Services

<ul style="list-style-type: none"> • Extremist views that places self or others at risk <p>Family and Social Relationships</p> <ul style="list-style-type: none"> • Relationship with family is experienced as negative, critical or rejecting • Regularly caring 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 <p>Social Presentation</p> <ul style="list-style-type: none"> • Appearance reflects poor care and hygiene related health issues • Persistent presentation in unwashed / unsuitable clothing despite advice and support being offered <p>Self-care Skills</p> <ul style="list-style-type: none"> • Absence of or poor self-care skills for age / level of understanding • Severe disability – relies on others to meet needs. 	<ul style="list-style-type: none"> • Children/young people who are privately fostered • Persistent expectation to care for other household members which impacts on the child / young person's development and opportunities <p>Housing, Employment and Finance</p> <ul style="list-style-type: none"> • Statutorily overcrowded / temporary accommodation / family are homeless • Prosecution/eviction proceedings • Serious debts / poverty impacting on ability to care for the child/ young person • Home in poor state of repair, deemed unfit for habitation <p>Family's Social Integration</p> <ul style="list-style-type: none"> • Family is socially isolated / excluded • Victimisation by others places child and family at risk • Has poor relationship/s with extended family; <p>Community Resources</p> <ul style="list-style-type: none"> • Parents / carers do not access or there is significantly poor access to local facilities and targeted services to meet assessed need • 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
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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 Child / Family' CAF approach should be undertaken and the identified lead professional will be responsible for coordinated the child / young person's plan of support. Complex needs can be met by the Local Support Team in partnership with other involved agencies supporting the child and their family. As stated in additional needs, the CAF 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 CAF must not delay any appropriate referral to a statutory service when it is required.

Families First Targeted Services (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 multi-agency Local Support Teams to children and families whose needs can only be met through multi-disciplinary interventions, requiring co-ordination via a CAF. 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. For more information about the Families First Service please go to: [Staffordshire Families First: The right help at the right time](#)

'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 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 CAF 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 CAF 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 Local Support Teams can provide advice to practitioners who may be concerned about the welfare of a child. Their regular multi-agency meetings offer the opportunity to share and discuss concerns about a child and the potential need to refer to the local Specialist Safeguarding Unit. If you are unsure about whether a referral to Children's Social Care (CSC) is required, please contact the First Response Service in the MASH to seek further advice and guidance. This can then identify whether a social work assessment under the Assessment Framework and a plan of support is required; or whether the needs of the child or young person can be appropriately met through the Local Support Teams or other services. If the initial assessment outcome is for support to be offered 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 Child / Family' CAF 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, 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 Direct, Play Services, Youth Service, Drug and Alcohol Services, Family Support and Parenting Support Services, Voluntary and Community Sector, Children with Disabilities Services, Inclusion Services, Targeted Services, Local Support Teams, Children's Social Care (when the eligibility criteria for accessing this service has been met).

Level 4: 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

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)
- Child or young person is missing from home regularly or for long periods.
- Fabricated / induced illness

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 / self-harm or suicide attempts / substance misuse of drugs and/or alcohol / eating disorders
- Failure or rejection to address serious (re)offending / anti-social behaviour
- Significant emotional / psychological problems as a result of neglect / poor parenting
- Frequently missing from home for long periods placing the at risk
- Presenting sexualised behaviour
- Child who abuses others

Identity

- Socially isolated and lacking appropriate role models
- Poor self-worth that results in extreme behaviours towards themselves and others

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 learning disability /mental health / substance misuse 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
- Consistent instability / violence/ domestic abuse within the home
- Teenage pregnancy / young inexperienced parents 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
- Allegations of harm by a person in a position of trust

Emotional Warmth

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

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 /domestic abuse / honour based violence / forced marriage

- Participates in gang activity / involved with serious or organised crime
- Demonstrates extremist views

Family and Social Relationships

- Child in care (looked after) or care leaver
- Family have abandoned child
- Subject to physical, emotional or sexual abuse / neglect
- Adoption breakdown
- Is the main carer for a family member
- Unaccompanied asylum seeking child / young person
- Forced marriage 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

- Family members have physical or mental health needs 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. substance misuse / gambling) 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 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 child/ren 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 First Response Service in the MASH. Practitioners in any doubt should seek advice from their line manager; their own agencies designated or named child protection lead; or from the First Response Service in the MASH.

For more information on the Eligibility Criteria for Accessing Staffordshire Children’s Social Care ‘Families First’ Services, please go to: [Web link to be added.](#)

Key services who provide support at this level:

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

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 SSCB Escalation procedure on the SSCB website at: www.staffsscb.org.uk/Part34EscalationProcedure.pdf

Contact Information

For further information and contact details on how to contact a Local Support Team, Specialist Safeguarding Unit or the First Response Service in the MASH, please go to:

<http://www.staffordshire.gov.uk/health/childrenandfamilycare/FamiliesFirstPartners/gettingaccesstosupport.aspx>

Making a referral to Staffordshire’s First Response Service in the MASH:

For advice and guidance on the process and the information you will be asked for when making a referral to the First Response Service in the MASH please go to: www.staffsscb.org.uk/PART3MAKINGREFERRALS

To view and complete a multi-agency referral form (MARF) to Staffordshire’s First Response Service in the MASH please go to: <http://www.staffsscb.org.uk/professionals/procedures/>

The ‘The Right Help at the Right Time - 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	Type of response to need	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 service/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 is significant it cannot be met by a universal service/setting alone but can be met by a single service or one group of single services acting with the universal service/setting.	Use the indicator guide or pre-CAF check list as an aid memoir to help you identify the need and service response. Make direct contact with the service that is required (e.g. Educational Welfare for school attendance, SEN team for education support). For a directory of children's services across Staffordshire visit the Family Information Service / Contact Centre http://www.staffordshire.gov.uk/education/childcare/families/homepage.aspx	The single service, working alongside the universal service/setting, implements the support and reviews its impact regularly.
Level 3: Multiple needs	The needs are complex and diverse and require a team of different services involved addressing them; as such a multi-agency response with a clear co-ordinated action plan is needed.	Initiate a CAF following the local guidance http://www.staffordshirechildrenstrust.org.uk/caf/ Multi-agency requests for support can also be sent to your Local Support Team http://www.staffordshire.gov.uk/health/childrenandfamilycare/FamiliesFirstPartners/yourlocalsupportteam.aspx	A team of professionals are allocated to support the needs of the child and/or family, a TAF meeting takes place, 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 no risk of actual or likely significant harm, but needs are acute and require a response from a specialist service.	Engage the right statutory service (e.g. Education Welfare prosecution for non-school attendance, Education Psychologist for Statutory Education assessment) or: Contact:	Services or statutory responses to assess, monitor or support the acute needs are provided.
Level 4 Acute / Specialist needs (child protection) s47 Children Act	There is actual or likely significant harm and a child needs to be referred to First Response in the MASH or Staffordshire Police.	First Response in the Multi-agency Safeguarding Hub (MASH) Telephone: 0800 1313 126 Email: frist@staffordshire.gov.uk Central Referral (Staffordshire Police) Telephone:101 / or 0300 123 4455 www.staffsscb.org.uk/procedures For advice on making a referral and access to the Multi-agency Referral Form (MARF), please use the following links: www.staffsscb.org.uk/PART3MAKINGREFERRALS.doc http://www.staffsscb.org.uk/professionals/procedures/	Safeguarding procedures and assessments are initiated by a qualified social worker.