

THRESHOLDS OF NEED AND SERVICE RESPONSES: GUIDANCE FOR STAFF

The following is a guide for practitioners and managers in every agency that works with, or is involved in, children, young people and their families. Its aim is to assist practitioners and managers in assessing and identifying a child's level of need, what type of services/resources may meet those needs and what processes to follow in moving from an assessment to a provision of services. It describes needs in terms of 'Tiers' - which is essentially a schematic way of helping to understand children's needs and how they could be met. It does not provide a rigid or concrete set of procedures – it is important that all agencies understand the needs of each individual child within their own context and realise that each child's situation is unique and specific to them. What follows is therefore **a guide to offer clarification**, not a rigid set of procedures.

In any tiered approach, the following is crucial to ensure a range of service provision is **available** to meet the range of need of children in the community and to ensure that the appropriate services are **accessed** to meet the range of need of children in the community. Everyone should understand that:

- children can and do move from one level to another;
- children in levels 2-4 also need and use universal services;
- repeated assessments should not be necessary to move children from one tier to another, and that children's stories can follow them as they progress through service provision;
- there will be some children - for example, those with complex needs – who should be enabled to move quickly and effortlessly to the required service response without necessarily going up through each level;
- for most children, the service aspiration is to secure them as low down the level of need as possible.

Below is Haringey's version of a continuum of need and intervention triangle similar to those found in other local authorities. For some children/young people it is clear where they fall on the continuum; for other children/young people a practitioner may need to use the Threshold Guidance in the appendix to try to decide whether or not the child/young person has additional needs, and where they might fall on the continuum; this process can help decide whether a CAF would be appropriate, to help further clarify need and appropriate response.

Together we ensure that every child matters

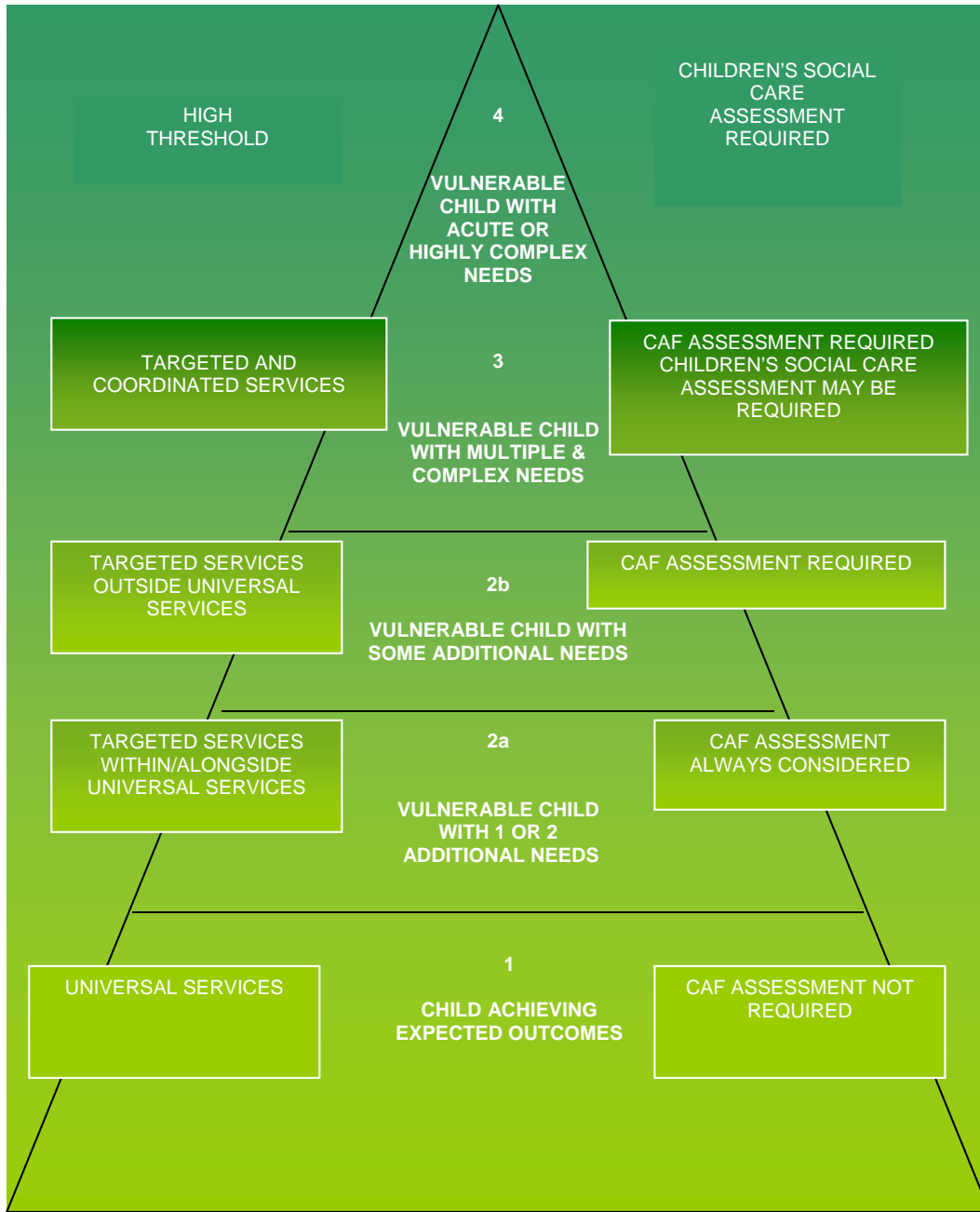
Sometimes it is only by completing a CAF that practitioners can gain a clear understanding of the child or young person's level of need and what would be the appropriate service response.

Just because a child is assessed at a point in time as meeting certain threshold criteria does not mean that they always will. An assessment is an on-going process, not an event; children and young people's needs often change over time and may cross different levels, i.e., high in some areas and low in others. The age of the child/young person and protective factors that may enhance resilience are also important contributory factors. Of central importance in understanding where a child's needs might lie on this continuum, is the cooperation and engagement of the parents and carers – a lack of cooperation or appreciation about the concern may of itself raise the level of the need and required response.

Most children and young people's needs will be met through universal services (Level 1) – for example, schools, youth services, GP surgeries – as well as from support from within the family, friendship, and community networks. A relatively very small number of children and young people, at risk of significant harm or significant impairment to health or development, require specialist support (Level 4), usually led by Children's Social Care.

In between Levels 1 and 4 are the vulnerable children/young people who have additional needs and are in need of targeted support. These children/young people's needs do not obviously rise to Level 4. Those in Level 3 will have met the criteria for assessment by social care – it will become a matter of judgment and consultation whether in fact their needs do need to be referred or can be met 'lower' down the hierarchy. Level 2 is where the majority of vulnerable children will have their needs assessed and met – it has been subdivided into (a) and (b) to reflect this fact and to acknowledge that some children actually sit just above universal provision and some sit only just under entry into social care. Some of the children who are most at risk are those that sit just below one or more thresholds and any assessment should be mindful of this.

HARINGEY CONTINUUM OF NEED AND INTERVENTION



Refer directly to Children's Social Care (Level 4) straightaway with any concerns that a child/young person has suffered or may be at immediate or acute risk of suffering

Your intervention should be designed to reduce the risk factors and increase the protective factors the child/young person is subject to

SAFEGUARDING CHILDREN: CONTINUUM OF NEED AND INTERVENTION

<p>4.VULNERABLE CHILD WITH ACUTE OR HIGHLY COMPLEX NEEDS</p>	<ul style="list-style-type: none"> • <i>Has suffered or is at risk of suffering significant harm/significant impairment to health or development</i> • <i>Children who are at risk if they remain at home. Children requiring specialist and integrated support. Allegations of abuse physical, sexual, emotional or neglect. <u>Children who fall into this category will always need an immediate referral to Social Care and/or the Police</u> and the Pan London Child Protection Procedures must be followed.</i> • <i><u>Assessment:</u> Assessing the needs of children in this category is almost always initiated by a Section 47 investigation, will be directed by a Strategy meeting or Discussion with the Police CAIT and which may lead to the completion of a core assessment and the convening of a an Initial Child protection Case Conference.</i> • <i><u>Service Provision:</u> Service provision will generally take the form of a child protection plan or a care plan for a child in care. Service plans will be constructed and reviewed within Child protection Conferences or Children in Care Reviews and other statutory planning fora.</i>
<p>3. VULNERABLE CHILD WITH MULTIPLE AND COMPLEX NEEDS</p>	<ul style="list-style-type: none"> • <i>Children in this category may have crossed the threshold into social care as defined by the Children Act and are or may be children in need.</i> • <i>Children in this category are the ‘blue folders’ as assessed by health</i> • <i>Before referring to social care, ask what their involvement will add to the intervention</i> • <i>If in doubt, always contact the First Response Service in Children and Families for advice and consultation</i> • <i><u>Assessment:</u> CAF Assessment, Lead Professional and Team around the Child may already be in place – if not, consideration should always be given to them. If social care takes the lead, they will complete an assessment under the Department of Health’s Framework for Assessment, which must be completed within seven working days of the referral. If a CAF has been undertaken it will feed into the Initial Assessment. Social Care may initiate a Core Assessment if the child/young person’s needs cannot be fully identified from the Initial Assessment</i> • <i>Service Provision: services to children will either be developed by the borough-wide CAF Panel, the social care Safeguarding Panel or through children in need planning</i>
<p>2 (B) VULNERABLE CHILDREN WITH SOME</p>	<ul style="list-style-type: none"> • <i><u>Assessment:</u> CAF assessments are always required for these children. The CAF may lead to the identification of a Lead Professional and a team around the child response.</i>

ADDITIONAL NEEDS	<ul style="list-style-type: none"> • <u>Service provision:</u> Will be developed either through the network CAF panels or the borough wide panel depending on complexity of need and range of service provision required.
2 (A) VULNERABLE CHILDREN WITH ONE OR TWO ADDITIONAL NEEDS	<ul style="list-style-type: none"> • <u>Assessment:</u> If a child's needs have been identified and can be met by the agency with the concern, it is not always necessary to complete a CAF. However, it should always be considered • <u>Service Provision:</u> if additional services are required then the network panels will oversee their coordination and delivery
1. CHILD ACHIEVING EXPECTED OUTCOMES	<ul style="list-style-type: none"> • Most children's or young people's needs are met by universal services alone • Some children may require a slight amendment or addition from those universal services to ensure their needs are well met

WHEN WOULD I CONSIDER REFERRING TO CHILDREN'S SOCIAL CARE?

PHYSICAL ABUSE	An act of physical aggression causing injury to a child, even if the injury was unintended
SEXUAL ABUSE	Includes any violation of the child's bodily privacy. Includes exposure of the child to adult sexuality
EMOTIONAL ABUSE	An attitude, behaviour, or failure to act that represents a risk to a child's emotional or social development; it is almost always present when another form of abuse is found. It might include exposing the child to physical violence, ignoring or rejecting the child.
NEGLECT	A pattern of failing to provide for a child's physical, emotional, or educational need. A single act of neglect might not constitute abuse but repeated acts of neglect do constitute abuse. The most common form of abuse but the most difficult to identify as it is an act of omission.

Risks to a child/young person's health or development can be of broadly two kinds:

1. *Abuse or ill-treatment causing an immediate and acute risk of significant harm to the child/young person's health or development*
2. *A chronic and long-term risk of harm to the child's health or development*

Appendix 1: Threshold Guidance

The following is a guide only. In particular, the examples of indicators can only offer a sense of the threshold. Degrees of severity and combinations of indicators for individual children need to be understood and assessed. The examples cannot be a substitute for professional judgment.

Level 4: Vulnerable Child with Acute or Highly Complex Needs	
<p><i>Developmental needs of infant/child/ young person</i></p> <p>Health</p> <ul style="list-style-type: none"> • Has severe / chronic health problems • Persistent substance misuse, smoking • Developmental milestones unlikely to be met • Early teenage pregnancy • Serious mental health issues • Dental decay & no access to treatment • Sexual exploitation/ abuse <p>Education & Learning</p> <ul style="list-style-type: none"> • Is out of school • Permanently excluded from school or at risk of permanent exclusion • Has no access to leisure activities <p>Emotional & Behavioural Development</p> <ul style="list-style-type: none"> • Regularly involved in anti-social/ criminal activities • Puts self or others in danger – missing • Suffers from periods of depression • Self-harming or suicide attempts <p>Identity</p> <ul style="list-style-type: none"> • Experiences persistent discrimination, e.g. on the basis of ethnicity, sexual orientation or disability • Is socially isolated & lacks appropriate role models • Alienates self from others <p>Family & Social Relationships</p> <ul style="list-style-type: none"> • Periods of being accommodated by Local Authority • Family breakdown related in some way to child's behavioural difficulties • Subject to physical, emotional or sexual abuse/ neglect • Is main carer for family member <p>Social Presentation</p> <ul style="list-style-type: none"> • Poor & inappropriate self-presentation <p>Self-care Skills</p> <p>Neglects to use self-care skills due to alternative priorities, e.g. substance misuse</p>	<p><i>Parent & Carer Factors</i></p> <p>Basic Care</p> <ul style="list-style-type: none"> • Parents unable to provide "good enough" parenting that is adequate & safe • Parents' mental health problems or substance misuse significantly affect care of child • Parents unable to care for previous children <p>Ensuring Safety</p> <ul style="list-style-type: none"> • There is an instability & violence in the home continually • Parents are involved in crime • Parents unable to keep child safe • Victim of crime <p>Emotional Warmth</p> <ul style="list-style-type: none"> • Parents inconsistent, highly critical or apathetic towards child <p>Stimulation</p> <ul style="list-style-type: none"> • No constructive leisure time or guided play <p>Guidance & Boundaries</p> <ul style="list-style-type: none"> • No effective boundaries set by parents Regularly behaves in an anti-social way in the neighbourhood <p>Stability</p> <ul style="list-style-type: none"> • Beyond parental control • Has no-one to care for him/ her <p><i>Family & Environment Factors</i></p> <p>Family History & Functioning</p> <ul style="list-style-type: none"> • Significant parental discord & persistent domestic violence • Poor relationships between siblings <p>Wider Family</p> <ul style="list-style-type: none"> • No effective support from extended family • Destructive/ unhelpful involvement from extended family <p>Housing</p> <ul style="list-style-type: none"> • Physical accommodation places child in danger <p>Employment</p> <ul style="list-style-type: none"> • Chronic unemployment that has severely affected parents' own identities • Family unable to gain employment due to significant lack of basic skills or long-term difficulties e.g. substance misuse <p>Income</p> <ul style="list-style-type: none"> • Extreme poverty/ debt impacting on ability to care for child <p>Family's Social Integration</p> <ul style="list-style-type: none"> • Family chronically socially excluded • No supportive network <p>Community Resources</p> <ul style="list-style-type: none"> • Poor quality services with long-term difficulties with accessing target populations

Level 3: Vulnerable Child with Multiple and Complex Needs

Developmental needs of infant/child/ young person

Health

- Concerns re: diet, hygiene, clothing
- Has some chronic health problems
- Missed routine & non-routine health appointments
- Overweight/ underweight/ enuresis
- Smokes, substance misuse
- Developmental milestones are unlikely to be met
- Some concerns around mental health

Education & Learning

- Identified learning needs & may have Statement of Special Ed. Needs Not achieving key stage benchmarks
- Poor school attendance/ punctuality
- Some fixed term exclusions
- No interests/ skills displayed

Emotional & Behavioural Development

- Difficulty coping with anger, frustration & upset
- Disruptive/ challenging behaviour
- Cannot manage change
- Unable to demonstrate empathy

Identity

- Subject to discrimination – racial, sexual or due to disabilities Demonstrates significantly low self-esteem in a range of situations

Family & Social Relationships

- Has lack of positive role models
- Misses school or leisure activities
- Peers also involved in challenging behaviour
- Involved in conflicts with peers/ siblings
- Regularly needed to care for another family member

Social Presentation

- Is provocative in behaviour/ appearance
- Clothing is regularly unwashed
- Hygiene problems

Self-care Skills

- Poor self-care for age – hygiene
- Precociously able to care for self

Parent & Carer Factors

Basic Care

- Difficult to engage parents with services
- Parent is struggling to provide adequate care
- Previously a LAC child
- Professionals have serious concerns

Ensuring Safety

- Perceived to be a problem by parent
- May be subject to neglect
- Experiencing unsafe situations

Emotional Warmth

- Receives erratic/ inconsistent care
- Care is often poor quality
- Parental instability affects capacity to nurture
- Has no other positive relationships

Stimulation

- Not receiving +ve stimulation – lack of new experiences or activities

Guidance & Boundaries

- Erratic/ inadequate guidance provided
- Parent not a good role model by behaving in an anti-social way

Stability

- Has multiple carers
- Has been a LAC child

Family & Environment Factors

Family History & Functioning

- Incidents of domestic violence between parents
- Acrimonious divorce/ separation
- Family have serious physical & mental health difficulties

Wider Family

- Family has poor relationship with extended family/ little communication
- Family is socially isolated

Housing

- Poor state of repair, temporary or overcrowded

Employment

- Parents stressed due to "overworking" or unemployment
- Parents find it difficult to obtain employment due to poor basic skills

Income

- Serious debts/ poverty impact on ability to have basic needs met

Family's Social Integration

- Parents socially excluded
- Lack of a support network

Community Resources

- Poor quality universal resources & access problems to these & targeted services

Level 2: Vulnerable Child with Some Additional Needs

Development needs of child/ young person

Health

- Defaulting on immunisations/ checks
- Is susceptible to minor health problems
- Slow in reaching developmental milestones
- Minor concerns re diet/ hygiene/ clothing
- Starting to default on health appointments

Education & Learning

- Have some identified learning needs that place him/ her on "School Action" or "School Action Plus" of the Code of Practice
- Poor punctuality
- Pattern of regular school absences
- Not always engaged in learning, e.g. poor concentration, low motivation & interest
- Not thought to be reaching educational potential
- Reduced access to books/ toys

Emotional & Behavioural Development

- Some difficulties with peer group relationships & with some adults Some evidence of inappropriate responses & actions
- Can find managing change difficult
- Starting to show difficulties expressing empathy

Identity

- Some insecurities around identity expressed, e.g. low self-esteem for learning
- May experience bullying around 'difference'

Family & Social Relationships

- Some support from family & friends
- Has some difficulties sustaining relationships

Social Presentation

- Can be over-friendly or withdrawn with strangers
- Can be provocative in appearance & behaviour
- Personal hygiene starting to be a problem

Self-care Skills

- Not always adequate self-care – poor hygiene
- Slow to develop age appropriate self-care skills

Parent & Carer Factors

Basic Care

- Parental engagement with services is poor
- Parent requires advice on parenting issues
- Professionals are beginning to have some concerns around child's physical needs being met

Ensuring Safety

- Some exposure to dangerous situations in home/ community Parental stresses starting to affect ability to ensure child's safety

Emotional warmth

- Inconsistent responses to child by parents
- Able to develop other +ve relationships

Stimulation

- Spends much time alone
- Child not exposed to new experiences

Guidance & Boundaries

- Can behave in an anti-social way
- Inconsistent boundaries offered

Stability

- Key relationships with family members not always kept up
- May have different carers
- Difficulties with attachments

Family & Environment Factors

Family History & Functioning

- Parents have some conflicts/ difficulty that can involve the children Experienced loss of significant adult
- May look after younger siblings
- Parent has health difficulties

Wider Family

- Some support from family/ friends

Housing

- Adequate/ poor housing
- Family seeking asylum or refugees

Employment

- Wage earner has periods of no work
- Parents have limited formal education • Parents stressed by unemployment

Income

- Low income

Family's Social Integration

- Family may be new to the area
- Some social exclusion problems

Community Resources

- Adequate universal resources but family may have access issues

Level 1: Child Achieving Expected Outcomes - has no current additional needs

<p><i>Developmental needs of child or young person</i></p> <p>Health</p> <ul style="list-style-type: none"> • Physically well • Adequate diet/ hygiene/ clothing • Developmental checks/ immunisations up to date • Dental & optical care as needed • Health appointments are kept • Developmental milestones appropriate • Speech & language development met • Appropriate height & weight • Healthy lifestyle • Sexual activity appropriate for age • Good state of mental health <p>Education & Learning</p> <ul style="list-style-type: none"> • Skills/ Interests • Success/ achievement • Cognitive development • Access to books/ toys, play <p>Emotional & Behavioural Development</p> <ul style="list-style-type: none"> • Feelings & actions demonstrate appropriate responses • Good quality early attachment • Able to adapt to change • Able to demonstrate empathy <p>Identity</p> <ul style="list-style-type: none"> • Positive sense of self & abilities • Demonstrates feelings of belonging & acceptance • A sense of self • An ability to express needs <p>Family & Social Relationships</p> <ul style="list-style-type: none"> • Stable & affectionate relationships with care givers • Good relationships with siblings • Positive relationships with peers <p>Social Presentation</p> <ul style="list-style-type: none"> • Appropriate dress for different settings • Good level of personal hygiene <p>Self-care Skills</p> <ul style="list-style-type: none"> • Growing level of competencies in practical & emotional skills, such as feeding, dressing & independent living skills 	<p><i>Parent & Carer Factors</i></p> <p>Basic Care</p> <ul style="list-style-type: none"> • Provide for child's physical needs: food, drink, appropriate clothing, medical & dental care <p>Ensuring Safety</p> <ul style="list-style-type: none"> • Protect from danger or significant harm, in the home & elsewhere <p>Emotional warmth</p> <ul style="list-style-type: none"> • Show warm regard, praise & encouragement <p>Stimulation</p> <ul style="list-style-type: none"> • Facilitates cognitive development through interaction & play • Enable child to experience success <p>Guidance & Boundaries</p> <ul style="list-style-type: none"> • Provide guidance so that child can develop an appropriate internal model of values & conscience <p>Stability</p> <ul style="list-style-type: none"> • Ensure that secure attachments are not disrupted • Provide consistency of emotional warmth over time <p><i>Family & Environment Factors</i></p> <p>Family History & Functioning</p> <ul style="list-style-type: none"> • Good relationships within family, including when parents are separated • Few significant changes in family composition <p>Wider Family</p> <ul style="list-style-type: none"> • Sense of larger family network & good friendships outside of the family unit <p>Housing</p> <ul style="list-style-type: none"> • Accommodation has basic amenities & appropriate facilities <p>Employment</p> <ul style="list-style-type: none"> • Parents able to manage the working or unemployment arrangements & do not perceive them as unduly stressful <p>Income</p> <ul style="list-style-type: none"> • Reasonable income over time, with resources used appropriately to meet individual needs <p>Family's Social integration</p> <ul style="list-style-type: none"> • Family feels integrated into the community • Good social & friendship networks exist <p>Community Resources</p> <ul style="list-style-type: none"> • Good universal services in neighbourhood
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